

5. The state will distribute camera ready copies by November 7, 1986.
6. The counties will begin bidding and/or print ordering by November 10, 1986.
7. The state will distribute preprinted forms by January 16, 1986.
8. The county printed forms will be printed by February 27, 1987.
9. Counties will distribute forms among their offices by March 20, 1987.
10. Counties will train their staff (with English and translated forms) by April 10, 1987.
11. Counties will begin to use the new forms on May 1, 1987 to affect grants on June 1, 1987

C. Automated Form

1. Turner approval of the NOA format by July 1, 1986.
2. The state will transmit camera ready copies to automated counties only by July 18, 1986.
3. The counties will begin bidding and/or print ordering by July 21, 1986.
4. Counties will begin to plan and program by August 4, 1986.
5. Counties will train their staff by April 10, 1987.
6. Counties will begin to use the new form on May 1, 1987 to affect grants on June 1, 1987.

D. Manual Messages (Two-Column Format) English

1. Turner approval by July 1, 1986.
2. A final NOA format decision will be reached by October 1, 1986.
3. The state will prepare camera ready copies on the new format by October 24, 1986.
4. The state will distribute to the counties by November 7, 1986.
5. Counties may preprint messages on the two column NOA forms.
6. The county will train their staff by April 10, 1987.

7. Counties will begin to use the new message language on May 1, 1987 to affect grants on June 1, 1987.

E. Manual Messages (Two-Column Format) Translated

1. Turner approval by July 1, 1986
2. Translations will be complete by September 26, 1986.
3. A final NOA format decision will be reached by October 1, 1986.
4. The state will prepare camera ready copies for each language on the appropriate translated form by October 24, 1986.
5. The state will distribute camera ready copies by November 7, 1986.
6. Counties may preprint messages on the two column NOA forms.
7. Counties will train their staff with English and translated messages by April 10, 1987.
8. Counties will begin to use the new message language on May 1, 1987 to affect grants on June 1, 1987.

F. Automated Messages

1. Turner approval by July 1, 1986.
2. Translations will be complete by September 26, 1986.
3. The state will distribute to the counties by October 10, 1986.
4. Counties will update their message tables by March 20, 1987 (may want to update others from the handbook also).
5. Counties will test the updated tables by April 24, 1987.
6. Counties will begin to use the new message language on May 1, 1987 to affect grants for continuing cases on June 1, 1987.

G. Known Exceptions

The time frames indicated above for manual NOA forms (both English and Spanish) are too short for Los Angeles County. They have indicated their worker training time will take three to four months. The additional time is required to accommodate the larger numbers of workers to be trained. The state anticipates the Los Angeles County manual forms to be implemented by July 1, 1987 to affect the August 1, 1987 grants.

See Section V.B. for a graphic representation of all the dates and time frames mentioned here.

PLANNING/SCHEDULING CHART

TITLE (PROGRAM/PLAN)		DIVISION/DEPARTMENT		RESPONSIBLE MAN/SUPERVISOR		DATE											
TURNER V. MCHAHON Implementation Plan		Page 1 of 5				3/26/86											
Major Task No.	Sub Task No.	OBJECTIVE	INDIVIDUAL ASSIGNED	1986 April 7	May 5	June 2	July 6	August 3	September 7	October 4	November 1	December 5	1987 January 2	February 6	March 5		
1	A	STATE HOA TRAINING															
	B	Prepare Handbook															
	C	Distribute Handbook to Counties															
	D	Provide Training to Counties															
2		RECIPIENT REVIEW GROUP (RRG)															
	A	Transmit Letter to Counties		*													
	B	Transmit Letter to Groups															
	C	Transmit Letter to Individuals															
	D	Transmit First Review Package															
3		FIELD STUDY															
	A	Plaintiff's Counsel and DSS Agree on Format (assume)		*													
	B	Choose Counties and Prepare Materials															
	C	Train Workers															
	D	Study Cycles															
	E	County Transmit Materials to State (5A)															
4		COUNTY COST ESTIMATES (Format and Standards)															
	A	Turner Court Approval of Format (assume)															
	B	Request Counties for Estimates															
	C	Estimates Due (5B)															
5		FINAL FORMAT DECISION															
	A	Field Study Results Received (3E)															
	B	County Cost Estimates Received (4C)															
	C	Final Decision Made															

LEGEND

\* SCHEDULED COMPLETION

◇ PREVIOUSLY SCHEDULED COMPLETION

◇ ACTUAL COMPLETION

◇ COMPLETION DATE PASSED

◇ REDIRECTED SCHEDULE

□ TIME SPAN







## LANNING/SCHEDULING CHART

[illegible]

DEPARTMENT OF SOCIAL SERVICES

4 P Street, Sacramento, CA 95814 M.S. 17-20  
16) 322-3216



November 12, 1985

ALL-COUNTY LETTER NO. 85-114

TO: ALL-COUNTY WELFARE DIRECTORS  
ALL DISTRICT ATTORNEYS  
ALL IV-D AGENCIES

SUBJECT: PRIOR APPROVAL AND REPORTING REQUIREMENTS FOR DATA  
PROCESSING EXPENDITURES

REFERENCE:

The Department of Health and Human Services (DHHS) has notified all States that Federal matching funding will not be granted for any data processing project where prior approval is required but not obtained. While this policy requirement has existed for some time, DHHS has previously provided retroactive "prior" approval fairly routinely. DHHS has now, apparently, decided that it will no longer provide retroactive approvals. Attached is a copy of the DHHS letter.

Counties proceeding with development and installation of data processing systems or procurement of data processing equipment/services prior to receipt of State and Federal approval will not be granted State and Federal financial participation. Therefore, counties are advised to prepare and submit appropriate funding requests to the Department of Social Services (DSS) well in advance of any development or procurement activities. Counties should keep in mind that the simplest project has generally taken a minimum of four months and a complex one a minimum of nine months to process through the State and Federal agencies.

In addition, if there is a potential for a cost overrun in any procurement for equipment/services, development, or maintenance and operations, prior approval must be obtained before such costs are incurred. Such requests must be accompanied by a full explanation of the need for additional funding and a revised cost/benefit analysis. Counties should attempt to identify the need for additional funds early in order to secure the necessary State and Federal approvals.

GEN 654 (9/79)

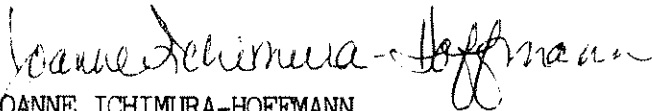


As a reminder, attached is a list of reporting requirements which must be met to assure State and Federal funding.

Even though DHHS has released this policy, we are currently working with other states to obtain an acceptable revision. We will keep you informed of any progress or change.

If you have any questions or concerns regarding the above, please call Jane R. Owens, Chief, Systems, Fraud and Audits Branch at (916) 924-2534 or Phyllis Iwasaki, Manager, County Approvals Section at (916) 924-2911.

Sincerely,



JOANNE ICHIMURA-HOFFMANN  
Deputy Director  
Management Systems and  
Evaluation Division

Attachments

cc: County Welfare Directors Association

## DEPARTMENT OF HEALTH &amp; HUMAN SERVICES

Office of the Secretary

Ms. Phyllis Iwasaki  
Manager, County EDP Section  
California Department of Social Services  
744 P Street, MS 19-12  
Sacramento, California 95814

Dear Ms. Iwasaki:

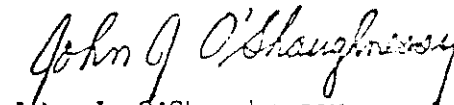
I am writing to you, and the heads of all State public assistance agencies, in order to clarify the Department of Health and Human Services' (HHS') requirement for States to obtain prior written approval before proceeding to acquire automatic data processing equipment and services, or develop and install automatic data processing information systems, for which a State will claim HHS matching funds. I wish to remind you that HHS' current regulations at 45 CFR 95.601, et seq., which govern the prior approval requirement, do not permit waiving this requirement. For this reason, States should not expect HHS to fund retroactively automatic data processing acquisitions or system developments and installations that were initiated subsequent to promulgation of these governing rules.

A State must request and receive prior written HHS approval for such undertakings before HHS will provide matching funds. If a State does submit a request for retroactive approval and funding of the design, development and installation of an automatic data processing system, or the acquisition of automatic data processing equipment or services, the Department will deny the request.

The Department is in the process of finalizing the proposed revisions to 45 CFR 95.601, et seq., which appeared in the November 19, 1984 Federal Register as a notice of proposed rulemaking. As part of this rulemaking, we are considering the revision of the Department's policy regarding the prior approval requirement.

If you or members of your staff have questions concerning this issue, please contact Joseph F. Costa, Director, Office of Public and State Data Systems on (202) 245-7488.

Yours truly,



John J. O'Shaughnessy  
Assistant Secretary for  
Management and Budget

cc: Jo Ann Ross, SSA  
John Berry, HCFA  
Naomi Marr, CCSE  
Richard Shute, OHDS

Reporting Requirements

- o The Department of Health and Human Services (DHHS) has directed that in the future feasibility studies be prepared and presented in the DHHS Advance Planning Document format. We have attached a copy of the prescribed format for your convenience. However, counties will still need to supply the same information and the same level of detail as described in Division 28.
- o Every system request should include a well-defined and sufficiently detailed budget section, which should be clearly listed in the table of contents, or otherwise easily found. If a county does not include such a budget section, action on the request will be withheld until receipt of an adequate budget section. The budget section must show the estimated costs of the project, and the basis on which those costs will be distributed to the various DHHS and non-DHHS programs. It must identify all the DHHS programs by the specific title of the Social Security Act under which funding is being sought, and categorize the funding in terms of project dollars (rather than Federal financial participation (FFP) amounts), by the appropriate level of FFP being sought.
- o Counties are reminded to submit quarterly progress reports during the development phase of a project. Quarterly reports should identify costs at the same level of detail as in the Statewide Automated Welfare System (SAWS) Cost Benefit Analysis/Implementation Plan (CBA/IP). Failure to provide quarterly progress reports will result in suspension of developmental funding. The Department uses quarterly reports to monitor the progress of projects. Quarterly reports are due by the 15th day following the end of the quarter.
- o A Post Implementation Evaluation Report (PIER) should be submitted as soon as possible after implementation. However, this should not be before initial operational problems are resolved or prior to the accumulation of sufficient data and experience to adequately judge the system performance. The optimum time after implementation to conduct a review is dependent upon the specific application, but a general rule would be six months after implementation. PIERs, as well as Quarterly reports, should identify costs at the same level of detail as in the SAWS CBA/IP.

ADVANCED PLANNING DOCUMENT (APD) FORMAT  
(including significant questions for guidance)

A. System Need

Does the plan state the requirement which the system or system modification is intended to satisfy, such as:

- (a) a new Federal/State statutory or regulatory requirement, or
- (b) other requirement that necessitated the development of the advanced plan?

B. System Objective

Does the plan explain what the system is supposed to do, and how it will support programmatic or administrative objectives of each DHHS funded program; e.g.:

- (a) new or improved service delivery,
- (b) operational efficiency, and/or
- (c) programmatic or administrative accountability?

C. Nature and Scope of the System

1. Does the plan identify program(s) covered and give sufficient detail to enable each program component to identify functions and/or services provided or supported?
2. Does the plan describe the relationship of the proposed system to another existing system(s), and how the systems will interface?

D. Proposed Approach to System Development

1. Does the plan provide a narrative description of the proposed approach to system development, including the following types of information:
  - (a) will the proposed system replace an existing system or will it make additions, deletions, or changes to an existing system;
  - (b) is the proposed system designed around existing functional organizations and existing procedures; if not, does the plan provide for determining changes required in the organizational or procedural structure in a time frame consistent with the system development schedule; or

- (c) are the functions of the proposed system duplicated in another system(s) currently in operation in the State; if so, does the plan provide for phasing out the duplicated functions, or is justification provided for the duplication?

E. Alternative Considerations

1. Are all viable alternatives costed out?
2. Does the plan describe specifically the alternative selected?
3. Does the plan explain why the proposed system was selected, and the advantages of it versus other means of satisfying the county needs and objectives (e.g., if the proposed system is a new system, did the county consider upgrading system(s) or transferring in another system), or
4. Does the plan identify alternative considerations as project milestones in the proposed activity schedule of projects that propose, as a first phase, a feasibility study to determine a system approach?

F. Proposed Activity Schedule

1. Does the plan describe the major phases and related tasks to be performed, and provide major project milestones and target dates for phase and task completion?
2. Does the plan have decision points where the county examines results to date, and decides on continued development or termination?
3. Does the plan allow time for review and approval of phased activities?

G. System Accountability

1. Does the plan specify organizational responsibility for ensuring that the system performs properly and efficiently?
2. Does the plan describe the project management structure?
3. Does the plan name the county project director and give his/her functional title and telephone number?

H. Cost Analysis/Benefits Anticipated

1. Does the plan provide the estimated cost to develop and operate the system?
2. Does the plan include or reference a methodology for directly charging development and operational costs to the various funding sources?
3. Does the plan explain the proposed methodology for distributing overhead costs that cannot be directly charged?

4. Does the plan explain the quantifiable and/or intangible benefits related to each of the funding sources; e.g., if the system is intended to detect or control administrative or programmatic fraud or waste, does the plan estimate anticipated savings?
5. Does the plan indicate the expected useful life of the system in relation to county needs?

I. Resource Statement

1. Does the plan provide an estimate of resources required to develop and operate the system:
  - (a) personnel,
  - (b) hardware,
  - (c) software, and
  - (d) other?
2. Does the plan commit county staff, or describe how the county will acquire needed resources from an outside source(s)?
3. Does the plan indicate that the county has sufficient equipment capacity to develop and operate the system, or describe how the county will acquire the equipment?
4. Does the plan provide evidence that procurement activities comply with Federal procurement regulations?

J. Budget

1. Does the plan include a proposed budget?
2. Does the plan provide a schedule of budgeted expenditures that corresponds with the activity schedule and resource statement?
3. Does the plan explain that matching county funds are available for the system or describe how the county proposes to obtain county funds for the system?

1 JOHN W. SPIEGEL  
2 PORTIA R. MOORE  
3 Morrison & Foerster  
4 One Market Plaza  
5 Spear Street Tower  
6 San Francisco, CA 94105

ORIGINAL  
FILED

OCT 1 1985

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9 For Urban Affairs  
10 625 Market Street, Suite 915  
11 San Francisco, CA 94105

WILLIAM L. WHITTAKER  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

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33 Attorneys for Defendant  
34 Michael Franchetti

35 IN THE UNITED STATES DISTRICT COURT

36 FOR THE NORTHERN DISTRICT OF CALIFORNIA

37 SANDRA TURNER, et al.,  
38 Plaintiffs,

39 v.

40 LINDA McMAHON, et al.,  
41 Defendants.

)  
) Civil Action No. C 81-4457 TEH  
)  
) STIPULATED MODIFICATIONS  
) TO CONSENT DECREE  
)  
)  
)

42 STIPULATED MODIFICATIONS TO CONSENT DECREE

1           1.    On June 20, 1983, the Court in the above-entitled  
2 action endorsed and filed a Consent Decree stipulated to by the  
3 parties, which inter alia established a process for reviewing  
4 and revising Notice of Action forms, formats and explanations  
5 sent by California county welfare departments to AFDC  
6 recipients.

7           2.    The parties have met and conferred for the past two  
8 years on both ad hoc issues and matters related to a final  
9 submission to the Court.

10          3.    On September 17, 1985, the parties met to discuss  
11 progress to-date in anticipation of final Court review, which  
12 in accordance with paragraph 29 of the Consent Decree is to be  
13 completed by October 1, 1985.

14          4.    Given an unanticipated high work-load associated with  
15 changes of law required by court decisions and legislation  
16 during the Consent Decree review period, the necessity for  
17 additional information from counties regarding technological  
18 limitations on the use of new formats, and the non-availability  
19 of a complete and final Consultant's Report until October 1985,  
20 the parties agree that the objectives of the Consent Decree  
21 will not be equitably realized within the time limits  
22 originally specified.

23          5.    In accordance with paragraph 49 of the Consent Decree,  
24 the parties jointly move the Court to modify and amend the  
25 terms of the Consent Decree to extend the following dates:

26           a.    In paragraph 13, delete "October 1, 1985" and  
27 insert "April 1, 1986".  
28



1           b. In paragraph 29, delete, respectively, "October  
2 1, 1985" and "January 1, 1986" and insert, respectively, "April  
3 1, 1986" and "July 1, 1986."

4           c. In paragraph 36, subsections (a) and (b), delete  
5 "October 1, 1985" and insert "April 1, 1986."

6           d. In paragraph 38, delete "January 15, 1986" and  
7 insert "July 15, 1986."

8           e. In paragraph 44, delete "October 1, 1985" and  
9 insert "April 1, 1986."

10          6. In further accordance with paragraph 49 of the Consent  
11 Decree, the parties jointly move that defendants' submission to  
12 the Court dated August 19, 1985, be considered an interim  
13 submission for Court information and not a final submission as  
14 required by paragraph 24.

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1 On behalf of the parties, the undersigned consent to the  
2 modifications of the Consent Decree as specified above.

3 John Van De Kamp  
4 California Attorney General

5 By: 

6 John J. Klee, Jr.  
7 Deputy Attorney General

8 Attorneys for Defendants

9 Dated: 9.27.85

10 Morrison & Foerster  
11 Western Center on Law & Poverty  
12 San Francisco Lawyers' Committee  
13 for Urban Affairs


14 By: 

15 Mark N. Aaronson

16 Attorneys for Plaintiffs

17 Dated: 9/27/85

18  
19 IT IS SO ORDERED, ADJUDGED AND DECREED

20   
21 Thelton E. Henderson  
22 United States District Judge  
23 Northern District of California

24 Dated: October 1<sup>st</sup> 1985

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Attorneys for Defendant  
Jesse R. Huff

18 IN THE UNITED STATES DISTRICT COURT  
19 FOR THE NORTHERN DISTRICT OF CALIFORNIA

20 SANDRA TURNER, et al., )  
21 Plaintiffs, )  
22 v. )  
23 LINDA McMAHON, et al., )  
24 Defendants. )

Civil Action No. 81-4457 TEH

FURTHER STIPULATED MODIFICATIONS  
TO CONSENT DECREE

28 FURTHER STIPULATED MODIFICATIONS TO CONSENT DECREE

1           1. On October 1, 1985 the Court in the  
2 above-entitled action endorsed and filed Modifications to the  
3 Consent Decree stipulated to by the parties, which changed the  
4 dates of submission specified in the Decree for the revision  
5 of Notice of Action forms, formats and explanations sent by  
6 California county welfare departments to AFDC recipients.

7           2. On April 1, 1986 the Court extended the aforesaid  
8 dates of submission two months upon stipulation of the  
9 parties.

10           3. During the past eight months, the parties have  
11 met and conferred numerous times on the text and procedures  
12 for implementing new forms, formats and explanations. The  
13 changes suggested by the consultant retained under the terms  
14 of the Consent Decree and a comprehensive program for  
15 standardizing the production of Notices of Actions in 58  
16 different counties necessitated a larger timeframe for  
17 implementation than originally anticipated. Defendants in  
18 consultation with plaintiffs' counsel have developed an  
19 Implementation Plan, which they seek to incorporate as part of  
20 the Consent Decree. This plan requires major revisions in the  
21 format and content of Notices of Action sent recipients to be  
22 implemented by May 1, 1987 and complete compliance by all  
23 counties with all its terms by January 1, 1992.

24           4. The Implementation Plan contains the following  
25 material:

26 //

27 //

28 //

- a. Statements and instructions for the counties about implementation procedures and, in particular, the change to a two-column format for presenting explanations and computations on Notice of Action forms and the use of upper and lower case type;
- b. Implementation standards and schedules for achieving statewide uniformity in the Notices of Action received by recipients;
- c. Revised forms for county use in preparing Notices of Action either manually or with computerized equipment;
- d. Revisions in the message language for changes in eligibility and benefit levels covered by paragraphs 13 and 23 of the Consent Decree;
- e. Maintenance procedures for monitoring county compliance and correcting county errors in the preparation of Notices of Action; and
- f. Procedures for institutionalizing continuing recipient participation in the review of Notices of Action forms, formats and explanations.

5. In revising Notices of Action forms and messages, the parties agree that disputes about the lawfulness of the proposed actions are not within the scope of the Consent Decree. Nothing in the package of proposed revisions contained in the Implementation Plan, explicitly or implicitly, indicates plaintiffs' agreement with or

1 ratification of defendants' interpretations of the legal  
2 bases for the information or explanations sent recipients.

3 6. In addition to requiring changes in the  
4 production of Notices of Action, the Consent Decree in parts  
5 VII and VIII limits the use of Welfare and Institutions Code  
6 §10950 to restrict the fair hearing rights of AFDC recipients.  
7 At paragraph 46, the Consent Decree anticipated cross-motions  
8 for summary judgment to resolve whether it is lawful for the  
9 state in mass law change situations to dismiss an appeal at a  
10 fair hearing when the recipient has only challenged the  
11 validity of a new law. Although the parties disagree about  
12 the lawfulness of this limitation on fair hearing rights, they  
13 agree that this issue need not be litigated at this time.  
14 They therefore propose as set forth below modifications of  
15 paragraph 45(e) and paragraph 46. In agreeing to these  
16 amendments, plaintiffs neither concede the lawfulness of this  
17 dismissal policy nor waive the right to adjudicate the issue  
18 in another action.

19 7. With reference to and in light of the aforesaid  
20 statements, the parties jointly agree to a modification of the  
21 Consent Decree, as provided by paragraph 49, as follows:

- 22 a. The Implementation Plan attached hereto  
23 shall be incorporated into the Consent  
24 Decree as a new Exhibit E. In the event  
25 of irreconcilable conflicts between the  
26 terms of the original Consent Decree and the  
27 Implementation Plan, the provisions of the  
28 latter shall prevail.

1                   b. The forms, formats and explanations  
2                   contained in the Implementation Plan  
3                   shall be considered approved by the  
4                   Court upon its endorsement of these  
5                   Stipulated Modifications.

6                   c. Paragraph 45(e) of the Consent Decree  
7                   is amended to read as follows:

8                   "If, at the hearing the hearing officer  
9                   decides that based on the written and  
10                  oral record the recipient was complaining  
11                  only about the wisdom of the law or its  
12                  validity and not its application to the  
13                  recipient's circumstances, the hearing  
14                  officer may terminate the hearing and DSS  
15                  may, by written decision, dismiss the  
16                  appeal."

17                  d. Paragraph 46 of the Consent Decree is  
18                  deleted in its entirety.

19                  8. In accordance with Rule 23(e) of the Federal  
20                  Rules of Civil Procedure, the parties agree to the following  
21                  procedure regarding notice to class members:

22                         (a) Notice of the proposed final terms of the  
23                         Consent Decree including the Implementation Plan shall be  
24                         published in the Los Angeles Times and San Francisco  
25                         Chronicle, two newspapers of general circulation in  
26                         California, within two weeks of the Court's approval of this  
27                         stipulated modification to the Consent Decree. Publications  
28                         shall appear twice, two weeks apart, in both newspapers with

1 the cost of publication to be paid by defendants. The content  
2 of the published notice shall be as set forth in the attached  
3 Addendum 1.

4 (b) Persons objecting to or questioning the  
5 terms of the Consent Decree shall have 30 days from the first  
6 date of published notice to review the Consent Decree, as  
7 amended and including the Implementation Plan, at the  
8 administrative offices of the county welfare departments and  
9 to file objections or questions with plaintiffs' counsel.

10 (c) Within 60 days from the first date of  
11 published notice, plaintiffs shall prepare and file with the  
12 Court, with copies served on defendants, a summary of all  
13 objections and questions along with any written statements  
14 received from objectors.

15 (d) Upon review of plaintiffs' submission, the  
16 Court shall determine whether a fairness hearing needs to be  
17 scheduled or whether it should enter an order declaring the  
18 Consent Decree finally approved as fair and reasonable.

19 9. In accordance with paragraphs 23 & 24 of the Consent  
20 Decree, the defendants have prepared a review of the decisions  
21 made regarding messages and notices covered by the Decree, a  
22 copy of which is attached as Addendum 2.

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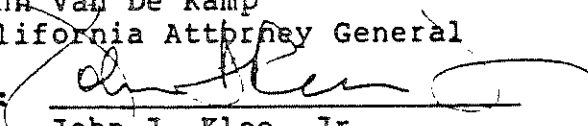
27 //

28 //



1 On behalf of the parties, the undersigned stipulate to the  
2 modifications of the Consent Decree noted above.

3 John Van De Kamp  
4 California Attorney General

5 By:   
6 John J. Klee, Jr.  
Deputy Attorney General

7 Attorneys for Defendants  
8 Dated: 5/22/86

9 Morrison & Foerster  
10 Western Center on Law & Poverty  
11 San Francisco Lawyers' Committee  
for Urban Affairs

12 By:   
Mark N. Aaronson

13 Attorneys for Plaintiffs  
14 Dated: 5/22/86

15 IT IS SO ORDERED, ADJUDGED AND DECREED

16  
17 Thelton E. Henderson  
18 United States District Judge  
Northern District of California

19 Dated: \_\_\_\_\_  
20  
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28

1 Addendum: Rule 23(e) Notice

2 AFDC Recipients

3 The California welfare department and AFDC representatives  
4 have reached final agreement in a lawsuit (Turner v. McMahon)  
5 that affects your due process rights. The suit concerns fair  
6 hearings and the kinds of notices you get. The agreement  
7 makes sure that you always have a right to keep your same  
8 benefits while you wait for a fair hearing. It also seeks to  
9 make notices about your AFDC grant easier to read and  
10 understand.

11 Copies of the actual agreement are at the administrative  
12 office of your county welfare department. You can get a copy  
13 to read until \_\_\_\_\_.

14 If you have objections or questions, you should contact  
15 one of the attorneys for the AFDC recipients by\_\_\_\_\_.  
16 They are Mark Greenberg, Western Center for Law and Poverty,  
17 3535 W. 6th Street, Los Angeles, CA, 90020, (213) 487-7211,  
18 and Mark Aaronson, S.F. Lawyers' Committee for Urban Affairs,  
19 301 Mission Street, Suite 400, San Francisco, CA., 94105,  
20 (415) 543-9444.

Addendum 2:  
State Review of Messages and Notices  
Pursuant to Paragraph 23 & 24

The requirement of subparagraph 23(a) to "review and, if necessary, propose revisions to: All DSS Notice of Action forms used by the counties, including the forms specified in Section V;" is met by the review of all AFDC notice of action forms currently approved by DSS for county use. No forms except as noted for Darces v. Woods have been retained.

The requirement of subparagraph 23(b) is to review current explanations for reasons for intended action specified in Exhibit C to this decree is met by the writing of messages for each of the still needed notices or the following explanation for not doing so.

1. There is no separate message for failure to provide information for the CA-2 re-verification. The notice for failure to provide needed information fulfills this requirement.
2. The 150% test has become the 185% test.
3. Messages dealing with changes in mandatory payroll tax withholding are unnecessary because of Heckler v. Turner.
4. Messages for common changes in non-earned income is only one message for any type of income rather than separate notices for each type of income.
5. The lump sum notices have been left out of this package except for a standard lump sum computation. The case Shaw v. McMahon currently has notices explaining the new rules under that order. All County Letter 85-59.
6. Alien eligibility has been changed because of the California Supreme Court case Darces v. Woods. That case has a set of approved notices of action that our review shows no need to amend. All County Letter 85-59.

The requirement of subparagraph 23(c) is to review recipient informing notices and messages for notices of action from June 20, 1983 forward. The bulk of the messages during this period were for court cases. The rest implemented new rules, of those many were one time only messages such as the notice which retroactively changed the income limitation from 150% of the need standard to 185%. The only recipient notice informing about a new law was the \$50 child support pass-on. The following list explains the department's review.

The following court cases were purely retroactive and do not require any ongoing changes. Collins v. Woods, Lowry v. Obledo, Heckler v. Turner, V. Williams v. Woods, Reyna v. McMahon, Green v. Obledo, Simon v. McMahon and the four combined cases each with its own notices Wood v. Woods, Wright v. Woods, North Coast Coalition v. Woods and Angus v. Woods.

Some cases had a mix of notices. Shaw v. McMahon had retroactive notices, but also continues to affect the lump sum rule. The case is on appeal in the District Court of Appeal and the notice language has been left alone. Form M44-2075 continues in use. Darces v. Woods concerns the sharing of income with unaided undocumented alien children. The language of those notices generally follows the active tone of the messages for Exhibit C to the Consent Decree. Our review discloses no need to change the continuing notice concerning how to allocate income in relevant families. The notices required for Moreno v. Prod have been rewritten and are numbered as forms NA 201 and NA 273.

Three cost of living increase notices have been sent. The last two were identical except in the new grant amounts, All County Letters 84-57 and 85-58. While no decision on 1986 notices has been made our review of the prior notices shows no need to change.

Major changes were made in the AFDC program by the Deficit Reduction Act of 1984. The changes were made in two groups. One was initiated by All County Letter 84-107, the other by 85-20. Many of the notices were only to initiate changes and were unneeded to continuing cases. These notices dealt with: exemption of burial plots and funeral agreements, the disregard for part-time employment increasing to \$75, the income limit increasing from 150% of the need standard to 185%, not counting Earned Income Tax Credits unless actually received, changing the rules for the filing unit, grant changes and retroactive aid by retroactive granting of the \$50 child support disregard, and corrective denial rescissions and increases concerning student earnings, excess property, burial plots, increase in part time workers disregard, increase to 185% from 150% for income test, and nonreceipt of the earned income tax credit. These notices were all designated "temporary" when first promulgated. The messages regarding sibling responsibility are not in use due to an injunction in the case of Simon v. McMahon.

We have rewritten the remaining DEFRA messages to use similar language to the message language adopted for Exhibit C to the Consent Decree. The pronoun "we" is used in some cases and separate notices are written for denials and changes. The

rewritten notices concern: \$30 and 1/3 earned income incentive, counting Job Training Partnership earnings after six months, counting student earnings for the 185% test after six months, approval of aid contingent on continuing effort to sell real property, discontinue for failure to sell property in six months, aliens sponsored by groups, and deeming of income from a senior parent with whom the assistance unit lives.

California changed its Work Incentive Program (WIN) to run a statewide federally approved demonstration program. A form for discontinuing the participants who refuse to fully participate was developed. It was message M-42-600A sent out June 18, 1985. That message is not revised because the notice will be generally obsolete by 1987. The counties who would use the form will be converting to Greater Avenues for Independence (GAIN) from WIN DEMO.

California is also running a demonstration program for refugees. The notices in that program were developed to inform the recipients that they were being transferred from AFDC to the refugee demonstration program. The transfers are complete and as there is no further use for the messages they are not revised. However two messages were written for refugees when their eligibility for the refugee demonstration project ends. They were part of All County Letter 85-106, October 15, 1985, and are revised to match the type of wording used in other messages.

The department has shared all of the rewritten forms and messages with the plaintiff's counsel. SDSS has substantially changed many of its own rewrites of the forms and messages using the suggestions of plaintiff's counsel. This process has, we hope, avoided future formalistic jousting in favor of the rational discussions already held. The forms have been kept straightforward and the messages simple and to the point.

The only recipient informing notice, other than court case notices, was the continuing use notice concerning the \$50 child support incentive. That notice is a stuffer which accompanies each incentive warrant sent to recipients. While that notice no longer fits the consent decree definition of telling recipients about a new law, DSS nonetheless reviewed it. It was determined that no changes would be made.

Finally, subparagraph 23(d) calls for the review of forms, explanations or notices adopted without compulsion of law. The only DSS act that even nearly fits this category is a deviation on the \$50 child support incentive stuffer granted to Los Angeles County. No change was made to that deviation granted on October 30, 1985.

The county is stopping your cash aid. Right now, you don't qualify. Your income has jumped because of what we call "lump sum income".

From \_\_\_\_\_ through \_\_\_\_\_ you can't get federal AFDC. That's because your total family income will meet your total family need for that number of months. (We got this number by dividing "B" into "A" from the table below.)

However, you may still be able to get state AFDC. State rules differ from federal rules. After the first month, "lump sum" income is counted as property. When the value of your property drops below \$1,000, you may be able to get state aid. But you can get it for only three out of each twelve months. You must apply for it in person.

But NOTE this: You might get federal aid sooner if you must use your "lump sum" to stop a life threatening situation. What's more, others of your family might get aid if they move into your home. Contact us if either of these things happen.

Shaw v. McMahon/44-207

# Notice of Action

If you have questions or want more information about this action, please contact your worker.

Case Name :  
Case Number :  
Worker :  
Phone :  
Date :

Description of the Action, Amount, Reason(s), Comments. Effective \_\_\_\_\_, the following action is being taken:

We are stopping aid payments for \_\_\_\_\_, because \_\_\_\_\_  
did not have a good reason for \_\_\_\_\_.

From \_\_\_\_\_ through \_\_\_\_\_ your family's aid:

\_\_\_\_\_ Will be stopped.

\_\_\_\_\_ Will be lowered from \_\_\_\_\_ to \_\_\_\_\_.

\_\_\_\_\_ We are not supposed to pay your family's aid to you during this period. Someone else should get the aid for your family. It should be someone you trust. Give the name and address of that person to your county worker. You must keep sending your monthly eligibility report (CA 7) to your county worker.

On \_\_\_\_\_, you may be eligible to have your aid payments restored. Contact your county worker between \_\_\_\_\_ and \_\_\_\_\_, to find out what you must do.

This action has been taken according to Welfare and Institutions Code Section 11347(c).

regulations. This action is required by State regulations which are available for review at the county welfare department: Manual of Policies and Procedures (MPP) Section(s) \_\_\_\_\_

California Administrative Code Title 22, Section(s) \_\_\_\_\_

Hearing. If you are dissatisfied with this action, your aid may continue unchanged if you ask for a State Hearing before the effective date of the action. Read the back for important information about your right to appeal this action.

11-42-000A WITH REREGISTRATION/DISCONTINUANCE

# Notice of Action

Page 1

If you have questions or want more information about this action, please contact your worker.

Case Name :  
Case Number :  
Worker :  
Phone :  
Date :

Description of the Action, Amount, Reason(s), Comments. Effective \_\_\_\_\_, the following action is being taken:

## (NOTICE OF ACTION: WIN DEREGISTRATION/DISCONTINUANCE)

We are stopping aid payments for \_\_\_\_\_ (1), because \_\_\_\_\_ (2) did not have a good reason for \_\_\_\_\_ (3).

From \_\_\_\_\_ (4) through \_\_\_\_\_ (5) your family's aid:

\_\_\_\_\_ (6) Will be stopped.

\_\_\_\_\_ (7) Will be lowered from \_\_\_\_\_ (8) to \_\_\_\_\_ (9).

\_\_\_\_\_ (10) We are not supposed to pay your family's aid to you during this period. Someone else should get the aid for your family. It should be someone you trust. Give the name and address of that person to your county worker. You must keep sending your monthly eligibility report (CA 7) to your county worker.

On \_\_\_\_\_ (11), you may be eligible to have your aid payments restored. Contact your county worker between \_\_\_\_\_ (12) and \_\_\_\_\_ (13), to find out what you must do.

This action has been taken according to Welfare and Institutions Code Section 11347(c).

Regulations. This action is required by State regulations which are available for review at the county welfare department: Manual of Policies and Procedures (MPP) Section(s) \_\_\_\_\_

and \_\_\_\_\_ California Administrative Code Title 22, Section(s) \_\_\_\_\_

State Hearing. If you are dissatisfied with this action, your aid may continue unchanged if you ask for a State Hearing before the effective date of the action. Read the back for important information about your right to appeal this action.



INSTRUCTIONS FOR COMPLETING THE WIN  
DEREGISTRATION/DISCONTINUANCE  
NOTICE OF ACTION

1. Insert the name of the sanctioned individual, unless that person is the principal earner. If the sanctioned individual is the principal earner, insert the term "your family".
2. Insert the name of the sanctioned individual.
3. Specify the reasons for deregistration/discontinuance. Examples of specific issues include, but are not limited to the following:
  - o Refusing to attend a Job Search Workshop.
  - o Refusing to continue in the Job Search Workshop.
  - o Not responding to a call-in notice by your county WIN worker.
  - o Not keeping your appointment with your EDD WIN worker.
  - o Refusing to accept child care necessary for you to attend a Job Search Workshop.
  - o Not appearing for a job interview.
  - o Disrupting a Job Search Workshop.
  - o Threatening an EDD WIN worker.
  - o Refusing a job offer.
  - o Quitting a job.
  - o Reducing your earnings.
4. Insert the sanction period's beginning date.
5. Insert the sanction period's ending date.
6. Mark this space, if the sanctioned individual is a principal earner or the only eligible child.
7. Mark this space for all other sanctioned members of the assistance unit.
8. Insert the aid received by the family in the month prior to the sanction.
9. Insert the aid to which the family will be eligible in the first month of the sanction.
10. Mark this space, if space 7 is marked and if the sanctioned individual is the caretaker relative.
11. Insert the date immediately following the last day of the sanction.
12. Insert the beginning date of the last month of the sanction.
13. Insert your county's cut-off date for authorizing regular aid payments for the month following the one specified in space 12.

NOTE: If an additional issue other than WIN noncooperation is present, attach the appropriate additional notice and/or computation sheet to the Notice of WIN Deregistration/Discontinuance.

# Notice of Action

*If you have questions or want more information  
about this action, please contact your worker.*

Case Name \_\_\_\_\_  
Case Number \_\_\_\_\_  
Worker \_\_\_\_\_  
Phone \_\_\_\_\_  
Date \_\_\_\_\_

Description of the Action, Amount, Reason(s), Comments. Effective \_\_\_\_\_, the following action is being taken

- ☐ The County has approved your application for cash aid.  
☐ The County is changing your cash aid from \$ \_\_\_\_\_ to \$ \_\_\_\_\_.

On the attached sheet, your cash aid payment has been figured.

By law, the County has considered the unmet need of the undocumented alien children who live with you when figuring your cash aid payment.

Regulations. This action is required by State regulations which are available for review at the county welfare department: Manual of Policies and Procedures (MPP) Section(s) 44-315, 44-133.3, Darces v. Woods Court Order and ACI 85-19

Medi-Cal. California Administrative Code Title 22, Section(s) \_\_\_\_\_

Child Support. The District Attorney can help you locate an absent parent, legally establish your child's paternity, and collect child support. To obtain these services, or to continue them if aid is discontinued, you must contact the District Attorney's office.

Family Planning Services. Information is available from the County Welfare Department on request.

State Hearing. If you are dissatisfied with this action, your aid may continue unchanged if you ask for a State Hearing before the effective date of the action. Read the back for important information about your right to appeal this action.

Darces v. Woods 4, Grant Approval on Grant Amount Change

# Notice of Action

Page      of     

*If you have questions or want more information about this action, please contact your worker.*

Case Name \_\_\_\_\_  
Case Number \_\_\_\_\_  
Worker \_\_\_\_\_  
Phone \_\_\_\_\_  
Date \_\_\_\_\_

Description of the Action, Amount, Reason(s), Comments. Effective \_\_\_\_\_ the following action is being taken

- ☐ The County has denied your application for cash aid.  
☐ The County is stopping your cash aid.

Your family's non-exempt income (line 12, Section B on the attached sheet) exceeds your family's needs as set by the State (line 3, Section C on the attached sheet). Thus, you cannot get aid.

By law, the County must include the unmet need of undocumented alien children who live with you when figuring your family's eligibility for aid. The County has done so on the attached sheet.

Regulations. This action is required by State regulations which are available for review at the county welfare department: Manual of Policies and Procedures (MPP) Section(s) 44-207.3, Darces v. Woods Court Order and ACL 85-19.

Medi-Cal: California Administrative Code Title 22, Section(s) \_\_\_\_\_

Child Support. The District Attorney can help you locate an absent parent, legally establish your child's paternity, and collect child support. To obtain these services, or to continue them if aid is discontinued, you must contact the District Attorney's office.

Family Planning Services. Information is available from the County Welfare Department on request.

State Hearing. If you are dissatisfied with this action, your aid may continue unchanged if you ask for a State Hearing before the effective date of the action. Read the back for important information about your right to appeal this action.

Darces v. Woods 1, Deny or Discontinue, Financial Eligibility

# Notice of Action

*If you have questions or want more information about this action, please contact your worker.*

Case Name :  
Case Number :  
Worker :  
Phone :  
Date :

Description of the Action, Amount, Reason(s), Comments. Effective \_\_\_\_\_, the following action is being taken:

- ☐ The County has denied your application for cash aid.  
☐ The County is stopping your cash aid.

The gross income of your eligible family members exceeds 185 percent of their needs as set by the State.

By law, the county must also consider both the income and needs of undocumented alien children who live with you to see if this helps you meet the income test. Your family's gross income still exceeds 185% of your needs, including the income and needs of the undocumented children. You do not qualify for aid. See table below.

Income Source (Eligible family, Undocumented children and Excluded Parent with income)	Amount	Computation of Need (Eligible family, Undocumented children and Excluded Parent with income)
_____	\$ _____	1. Basic Need for _____ Persons \$ _____
_____	\$ _____	2. Special Need + _____
_____	\$ _____	3. Total \$ _____
_____	\$ _____	x 1.85
_____	\$ _____	4. 185% of Need \$ _____
_____	\$ _____	
_____	\$ _____	
Gross Income	\$ _____	

Regulations. This action is required by State regulations which are available for review at the county welfare department: Manual of Policies and Procedures (MPP) Section(s) 44-207.2, Darces v. Woods Court Order and ACL 85-19.

Medi-Cal: California Administrative Code Title 22, Section(s) \_\_\_\_\_

Child Support. The District Attorney can help you locate an absent parent, legally establish your child's paternity, and collect child support. To obtain these services, or to continue them if aid is discontinued, you must contact the District Attorney's office.

Family Planning Services. Information is available from the County Welfare Department on request.

State Hearing. If you are dissatisfied with this action, your aid may continue unchanged if you ask for a State Hearing before the effective date of the action. Read the back for important information about your right to appeal this action.

**Darces v. Woods 2, Deny or Discontinue, 185 Percent Gross Income**

# Notice of Action

If you have questions or want more information about this action, please contact your worker.

Case Name  
Case Number  
Worker  
Phone  
Date

Description of the Action, Amount, Reason(s), Comments. Effective                     , the following action is being taken:  
The County is stopping your cash aid for the month of                     .

The gross income of your eligible family members exceeds 185 percent of their needs as set by the state.

By law, the county must also consider both the income and needs of undocumented alien children who live with you to see if this helps you meet the income test. Your family's gross income still exceeds 185 percent of your needs, including the income and needs of the undocumented children. So you do not qualify for aid. See table below.

If you wish your aid to start again, you must turn in a CA 7 report for the month shown above. You may get aid again if your income has dropped or if your needs have increased.

Income Source (Eligible family, Undocumented Children and Excluded Parent with income)	Amount	Computation of Need (Eligible family, Undocumented Children and Excluded Parent with income)
<u>                                    </u>	\$ <u>          </u>	1. Basic Need for <u>    </u> Persons \$ <u>          </u>
<u>                                    </u>	\$ <u>          </u>	2. Special Need <u>          </u> + <u>          </u>
<u>                                    </u>	\$ <u>          </u>	3. Total <u>          </u> \$ <u>          </u>
<u>                                    </u>	\$ <u>          </u>	<u>          </u> x 1.85
<u>                                    </u>	\$ <u>          </u>	4. 185% of Need <u>          </u> \$ <u>          </u>
<u>                                    </u>	\$ <u>          </u>	
<u>                                    </u>	\$ <u>          </u>	
<u>                                    </u>	\$ <u>          </u>	
Gross Income	\$ <u>          </u>	

Regulations. This action is required by State regulations which are available for review at the county welfare department: Manual of Policies and Procedures (MPP) Section(s) 44-207.2, Darces v. Woods Court Order and ACL 85-19.

Medi-Cal. California Administrative Code Title 22, Section(s)                                     

Child Support. The District Attorney can help you locate an absent parent, legally establish your child's paternity, and collect child support. To obtain these services, or to continue them if aid is discontinued, you must contact the District Attorney's office.

Family Planning Services. Information is available from the County Welfare Department on request.

State Hearing. If you are dissatisfied with this action, your aid may continue unchanged if you ask for a State Hearing before the effective date of the action. Read the back for important information about your right to appeal this action.

Darces v. Woods 3, Suspension 185 Percent Gross Income

# Notice of Action - Continued

Case Name :  
Case Number :  
Date of Notice :

COMPUTATION OF: ☐ Financial Eligibility  
☐ Aid Payment  
(Month - Year)

## Section A: Needs of Undocumented Alien Children and Excluded Parent with Income

Needs	Income of Undocumented Alien Children
1. Total Family Needs* \$ _____	5. Earned Income \$ _____
2. Eligible Family Needs - _____	6. Standard Work Expense Disregard - _____
3. Special Needs** + _____	7. Other Countable Income + _____
4. Total Needs** _____	8. Total Income*** _____
* Eligible Family Members, Undocumented Alien Children and Excluded Parent with Income.	9. <input type="checkbox"/> Line 8 is more than line 4. All income of the parent(s) is used to figure the AFDC eligibility and aid payment.
** Undocumented Alien Children and Excluded Parent with Income.	10. <input type="checkbox"/> Line 4 is \$ _____ more than line 8. This amount will be subtracted from the family income before figuring the AFDC eligibility and aid payment. See line 11, Section B.
	*** Income of Undocumented Alien Children.

## Section B: Net Income

Name	Eligible Family	Excluded Parent	Total
1. Total Earned Income	\$ _____	+ \$ _____	
2. Work Expense Disregard	- _____	- _____	
3. Child Care	- _____	- _____	
4. \$30	- _____	XXXXXXXXXXXX	
5. Subtotal	\$ _____	XXXXXXXXXXXX	
6. 1/3 Line #5	- _____	XXXXXXXXXXXX	
7. Other Countable Income			
a. _____	+ _____	+ _____	
b. _____	+ _____	+ _____	
c. _____	+ _____	+ _____	
*8. Support Paid	- _____	- _____	
9. Income Subtotal(s)	\$ _____		
10. Total Income of Eligible Family Member(s) and Excluded Parent (Line 9)	(10.) \$ _____		
11. Less Undocumented Alien Children's Unmet Needs (From Item 10, Section A)	(11.) - _____		
12. NET INCOME TOTAL	(12.) \$ _____		

## Section C: ELIGIBLE FAMILY MEMBERS' NEED

1. Basic Need for \_\_\_\_\_ Persons \$ \_\_\_\_\_  
2. Special Need + \_\_\_\_\_  
3. TOTAL NEED OF ELIGIBLE FAMILY \$ \_\_\_\_\_

## Section D: COMPUTATION OF AID

1. Basic Need for \_\_\_\_\_ Persons \$ \_\_\_\_\_  
2. Special Need - \_\_\_\_\_  
3. Less Net Income, Line 11 - \_\_\_\_\_  
4. Total \$ \_\_\_\_\_  
5. Overpayment Adjustment - \_\_\_\_\_  
6. AID PAYMENT \$ \_\_\_\_\_

Regulations. These rules apply to the information on this page: Darces v. Woods Court Order & ACL 85-10. You may review them at your welfare office.

State Hearing. If you think we are wrong, you may ask for a hearing. The back of page 1 tells how. Darces v. Woods 9, Financial Eligibility/Grant Computation Worksheet

DEPARTMENT OF SOCIAL SERVICES  
744 P Street, Sacramento, CA 95814



October 17, 1985

ALL COUNTY INFORMATION NOTICE NO. I-80-85

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: TURNER v. McMAHON CONSENT DECREE

REFERENCE:

In a mutual agreement with the attorneys for the plaintiffs in Turner v. McMahon the Department has delayed the implementation of the Notice of Action (NOA) messages and forms required in the Turner Consent Decree. The new implementation date is expected to be July 1, 1986.

As part of the agreement, the Department has developed a new two column format for NOAs. Also, we agreed to survey all the counties on their ability to use the required form. This letter begins the survey process to which we agreed.

Attached is a copy of the survey, two versions of the proposed NOA form (the NA296-A and NA296-B) and a copy of the NA296-B with a sample message and computation. Only one form will be selected for the final use. It will be amended based on survey responses as well as the advice of DSS legal and program staff and the Turner plaintiff attorneys. The forms were designed in consideration of both the "manual" and the "automated" county systems. The goal is to use one blank NOA form in all counties. The state will maintain a supply, in three part sets, in the warehouse. Counties may print their own supplies on regular or pin fed stock. Continuation pages (see attached NA270, NA271, NA273 and NA274) will also be preprinted and warehoused. Counties with automated systems can convert the continuation pages to messages to be printed on copies of the new NA296.

Please thoroughly review the two proposed NOA forms and answer the questionnaire as completely as possible. The Department will summarize the county responses and prepare a report for the Turner plaintiff attorneys prior to meeting with them during the first week in December. All comments are valuable and will be included in the report. We plan no other vehicle for county comment on this proposed format.

Send your written responses to:

State of California  
Department of Social Services  
AFDC-PIB, Forms Unit  
MS 16-31  
744 P Street, Room 1650  
Sacramento, CA 95814

Attention: Doris Keller

Responses are due November 4, 1985.

If you have any questions, please call Doris Keller at (916) 324-2017.

*Robert Sutch*  
for ROBERT A. HOREL  
Deputy Director

Attachment

cc: CWDA



COUNTY NOTICE OF ACTION

QUESTIONNAIRE

PLEASE ANSWER THE QUESTIONS AS COMPLETELY AS POSSIBLE. ATTACH ADDITIONAL SHEETS AS NECESSARY.

-----  
County Name

-----  
Date

-----  
Contact Person for Further Information

-----  
Telephone Number

1. a. On the average, how many AFDC Notices of Action (NOA) does your county prepare monthly? \_\_\_\_\_
- b. On the average, how many NOAs does your county prepare monthly in each of the programs listed below?

Medi-Cal \_\_\_\_\_

Food Stamps \_\_\_\_\_

GA/GR \_\_\_\_\_

RCA/ECA/RDP \_\_\_\_\_

IHSS \_\_\_\_\_

Others (specify program) \_\_\_\_\_  
\_\_\_\_\_

FOR PURPOSES OF THIS QUESTIONNAIRE, manual NOAs are defined as those that have the specific information completed by hand or typewriter. The specific information means either 1) the case name, etc., and completion of the checked boxes; and/or 2) the case name and the entire message. Automated NOAs are those which are prepared by selecting stored messages to be printed on blank NOA forms. The selection may be made manually or automatically but the printing is done automatically by programmed equipment.

A. GENERAL QUESTIONS: MANUAL SYSTEMS

2. Show below, by action type, the percentage of monthly AFDC NOAs prepared by each method.

Action	% of Total Prepared "Manually"	% of Total Prepared "Automatically"
Approve	_____	_____
Deny	_____	_____
Discontinue	_____	_____
Suspend	_____	_____
Increase grant	_____	_____
Decrease grant	_____	_____
Under/Overpayments	_____	_____
Others	_____	_____

3. Show below the monthly percentage of other program NOAs prepared by both methods.

	Total # of Monthly Notices	% of Prepared "Manually"	% of Prepared "Automatically"
Medi-Cal	_____	_____	_____
Food Stamps	_____	_____	_____
GA/GR	_____	_____	_____
RCA/ECA/RDP	_____	_____	_____
IHSS	_____	_____	_____
Others	_____	_____	_____
(specify programs)	_____	_____	_____

4. If not now automated, please explain any plans the County may have to move toward automating notices of action. Include projected timeframes and types of equipment. Please be specific.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Continue on to Question 5 and beyond if your County prepares any NOAs with automated equipment or you expect to within the next 12 months.

Go to Question 16 if your County prepares no "automated" NOAs and does not intend to.

## B. GENERAL QUESTIONS, AUTOMATED SYSTEMS

5. What percentage of the total monthly NOAs are prepared by automated equipment?

\_\_\_\_ 0%. You must answer Question 4.

More than 0% but less than 100%. Show the percentage: \_\_\_\_\_  
Go to Question 6.

\_\_\_\_ 100%. Go to Question 6.

\_\_\_\_ 0% now but expect at least some within the next year. You must answer both Question 4 and continue to #6 and beyond.

6. What type(s) of automated equipment does your county utilize to generate NOAs and what percentage of the automated NOAs are generated by each?

<u>Type</u>	<u>Brand</u>	<u>Style</u>	<u># of Units</u>	<u>% of Automated NOAs Generated</u>
Memory Typewriter(s)				
Word Processor(s)				
Personal (Micro) Computer(s)				
Mini-Computer(s)				
Main Frame Computer(s)				

7. Please indicate all the pertinent information concerning the currently used printer(s) in your county.

<u>Brand</u>	<u>Print Type (Impact, Laser, etc.)</u>	<u>Print Style (Dot Matrix, Character, etc.)</u>	<u># of Units</u>	<u>Speed</u>	<u>% of Automated NOAs Generated</u>



C. FORMAT QUESTIONS, AUTOMATED SYSTEMS

(Please refer to the attached NA 296A and 296B.) Only one of the proposed 296 forms will be finalized. For two-page NOAs, the printed information would continue on an identical form when using an automated system and a continuation page when the NOA is completed manually.

11. a. Can your automated equipment be reprogrammed to print in the format of the samples (the written message in a single column on the left and the numbers on the right)?

\_\_\_\_Yes. Specify the amount of time it would take you to reprogram: \_\_\_\_\_

Specify the cost to reprogram: \$ \_\_\_\_\_

\_\_\_\_No. Specify the earliest date your system could be modified to print NOAs in this format: \_\_\_\_\_

Specify the estimated cost of the modifications and/or purchases necessary to print in this format: \$ \_\_\_\_\_

- b. Can your system be reprogrammed for a new AFDC format and still print notices on letters in other programs in the old format?

\_\_\_\_Yes.

\_\_\_\_No.

- c. If the AFDC format changes, will you change the format for all of the other programs?

\_\_\_\_Yes. Please list the programs and explain why you will change:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_No. Please explain why: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

12. Can your automated equipment be programmed to print words and numbers on Lines 2, 3, 4, 14, and 15 of the proposed NA 296A or NA 296B?

\_\_\_\_ Yes.

\_\_\_\_ No. Specify why the equipment cannot be programmed for this function: \_\_\_\_\_

-----

13. Can your county's automated system complete the check boxes on the attached NA 296-A and NA 296-B forms?

\_\_\_\_ Yes.

\_\_\_\_ No. Please explain why: \_\_\_\_\_

-----

14. a. Is the county appeals address block on the NA 296-A and NA 296-B in a location that is compatible to the location of the county address on the other forms you print?

\_\_\_\_ Yes. Go to Question 15.

\_\_\_\_ No. Go to Question 14b.

- b. Can your system be modified to change the location on the other correspondence?

\_\_\_\_ Yes.

\_\_\_\_ No. Please explain why: \_\_\_\_\_

-----

15. Attached in the review package is a NA 296-B that has been completed with a sample message. The items underlined in the sample represent blanks in the original message that have been filled in for a specific case.

- a. Is your automated system capable of filling in the person's name and the date as well as the computation?

\_\_\_\_ Yes. Go to Question 16.

\_\_\_\_ No. Please explain the procedure your county uses to fill in the case specific information: \_\_\_\_\_

-----

b. Can your system be reprogrammed to fill in the case specific information?

\_\_\_\_Yes. Go to Question 16.

\_\_\_\_No. Please explain the procedure your county will probably use to fill in the case specific information: \_\_\_\_\_  
\_\_\_\_\_

D. FORMAT QUESTIONS, MANUAL AND AUTOMATED QUESTIONS

All Counties Must Answer These Questions

(Please refer to the attached sample forms.) Only one of the proposed 296 forms will be finalized. For two-page NOAs, the printed information would continue on an identical form when using an automated system and a continuation page when the NOA is completed manually.

16. The computation section is drafted at 6 lines to the inch on the proposed NA 296A and 296B. If it is printed in this same spacing will your county be able to complete this section with your automated equipment?

\_\_\_\_Yes.

\_\_\_\_No. Explain the reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. a. The NA 296-B has a space for the worker's branch office address and the Appeals (hearings) Office address. Will your county need additional space for another county address?

\_\_\_\_No.

\_\_\_\_Yes. Please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- b. The NA 296-A will show the county name and address on the front along with an EW branch office location. If this form is adopted the back will still show the Appeals Office address. Will this be easier for your county to use than the 296-B?

\_\_\_\_ Yes. Please explain: \_\_\_\_\_

\_\_\_\_ No. Please explain: \_\_\_\_\_

18. Does your county have the capacity for retaining specific information not shown in the computation, i.e., the amounts for the 30 and 1/3 at Line #10?

\_\_\_\_ Yes.

\_\_\_\_ No. Please explain: \_\_\_\_\_

19. a. The "Date/Case Name" block is in different locations on the 296-A and the 296-B forms. Which location is best for your county?

\_\_\_\_ 296-A. Answer 19b below.

\_\_\_\_ 296-B. Answer 19b below.

\_\_\_\_ Neither one. Answer 19c below.

- b. Please explain the specific reasons for not choosing the other format:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- c. Please explain why neither format can be used in your county. Be specific:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



20. How will your county use the proposed continuation pages? Please fully explain any "other comments" you offer.

NA 270

\_\_\_\_ Will use as a preprinted page.

\_\_\_\_ Will use a second 296 instead.

NA 271

\_\_\_\_ Will use as a preprinted page.

\_\_\_\_ Will convert it to messages. Please specify the messages your county will create from this page: \_\_\_\_\_

\_\_\_\_ Other comments: \_\_\_\_\_

NA 273

Will use as a preprinted page.

Will convert it to a message.

\_\_\_\_ Will have trouble using automated equipment to reproduce and/or complete the chart. Explain the problems in automating this form: \_\_\_\_\_

\_\_\_\_ Other comments: \_\_\_\_\_

NA 274

\_\_\_\_ Will use as a preprinted page.

\_\_\_\_ Will convert it to a message.

\_\_\_\_ Cannot reproduce ten vertical columns of numbers. The county can do only  
\_\_\_\_\_ columns of this form.

\_\_\_\_ Other comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

21. On the average how many CA 7s are returned completed each month before the end of the month but too late for timely notice?

\_\_\_\_\_

22. The proposed NA 296-A and 296-B forms have a space for a specific date in the "state hearings" section. Please explain the reasons your county would have difficulties, if any, in completing this blank. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

23. Please show below any other problems your county would encounter when implementing either of these NOA forms (NA 296-A and NA 296-B). Please also list the specific reasons for the problem(s). \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Notice of Action

COUNTY ADDRESS

appeals

**SAMPLE**

DATE	
CASE NAME	
CASE NUMBER	
WORKER	
WORKER'S ADDRESS	
PHONE	
QUESTIONS? ASK YOUR WORKER	
<input type="checkbox"/> GROSS INCOME IN THE MONTH OF:	
1. County Collected Child Support	\$
2.	+
3.	+
4.	+
5. TOTAL GROSS INCOME	=
<input type="checkbox"/> NET INCOME IN THE MONTH OF:	
6. Total Earned Income	\$
7. Earned Lump Sum Income	+
8. Work Expense Disregard	-
9. Dependent Care Disregard	-
10. \$30 and 1/3 Disregard	-
11. \$30 Disregard	-
12. Unearned Lump Sum Income	+
13. Other Countable Income	+
14.	+
15.	+
16. Court Ordered Support Paid	-
17. NET INCOME A	=
County Collected Child Support	
18. (financial eligibility only)	+
19. NET INCOME B	=
<input type="checkbox"/> FAMILY NEEDS IN THE MONTH OF:	
20. Basic Needs For:	\$
21. Special Needs	+
22. Total Needs	=
23.	x 1.85
24. 185% of Needs	=
<input type="checkbox"/> MONTHLY CASH AID AMOUNT	
25. Basic Aid For	\$
26. Special Needs	+
27. SUBTOTAL	=
28. NET INCOME A (Line 17)	-
29. SUBTOTAL	=
Overpayment Adjustment	
30. (See Page 2)	-
31. Monthly Cash Aid Amount	\$

**Rules:** These rules apply. You may review them at your welfare office:

**State Hearing.** If you think this action is wrong, you may ask for a hearing. The back of this page tells how. Your cash aid amount may not be changed if you ask for a hearing by

**Medi-Cal.** If your cash aid has been stopped or denied you will get another notice about Medi-Cal.

**Child Support.** The District Attorney's Office can help you get support from your child's absent parent. You must ask the DA's Office for help.

**Family Planning Services.** Your Welfare Office will give you information when you ask.

NA 296-A

# Notice of Action

COUNTY ADDRESS

*appeals*

**RULES:** These rules apply. You may review them at your welfare office.

## STATE HEARING.

If you think this action is wrong you may ask for a hearing. The back of this page tells how. Your cash aid amount may not be changed if you ask for a hearing by

DATE	:	
CASE NAME	:	
CASE NUMBER	:	
WORKER	:	
WORKER'S ADDRESS	:	
PHONE	:	
<b>QUESTIONS? ASK YOUR WORKER</b>		
<input type="checkbox"/> <b>GROSS INCOME</b> IN THE MONTH OF:		
1. County Collected Child Support	\$	
2.	+	
3.	+	
4.	+	
5. TOTAL GROSS INCOME	=	
<input type="checkbox"/> <b>NET INCOME</b> IN THE MONTH OF:		
6. Total Earned Income	\$	
7. Earned Lump Sum Income	+	
8. Work Expense Disregard	—	
9. Dependent Care Disregard	—	
10. \$30 and 1/3 Disregard	—	
11. \$30 Disregard	—	
12. Unearned Lump Sum Income	+	
13. Other Countable Income	+	
14.	+	
15.	+	
16. Court Ordered Support Paid	—	
17. NET INCOME A	=	
18. County Collected Child Support (financial eligibility only)	+	
19. NET INCOME B	=	
<input type="checkbox"/> <b>FAMILY NEEDS</b> IN THE MONTH OF:		
20. Basic Needs For:	\$	
21. Special Needs	+	
22. Total Needs	=	
23.	x	1.85
24. 185% of Needs	=	
<input type="checkbox"/> <b>MONTHLY CASH AID AMOUNT</b>		
25. Basic Aid Needs	\$	
26. Special Needs	+	
27. SUBTOTAL	=	
28. NET INCOME A (Line 17)	—	
29. SUBTOTAL	=	
30. Overpayment Adjustment (See Page 2)	—	
31. Monthly Cash Aid Amount	\$	

**RECEIVED**

**Medi-Cal.** If your cash aid has been stopped or denied you will get another notice about Medi-Cal.

**Child Support.** The District Attorney's Office can help you get support from your child's absent parent. You must ask the DA's Office for help.

**Family Planning Services.** Your Welfare Office will give you information when you ask.

RECEIVED BY

NA296-B

# Notice of Action

COUNTY Appeals Address

County Appeals  
123 Main Street  
County Seat, Calif. 98765

Jane Doe  
789 - 10th Street  
Anytown, Calif. 98763

Effective November 30, we're stopping your aid.

For twelve months we give a credit to wage earners on aid: \$30 a month. And for four months only, still another credit: one third of all the net income after all the other credits are allowed.

Jane Doe's four months for the 1/3 credit ends on November 30. When you lose that credit, your countable family income goes up. Your aid stops when your income is more than the need standard set by the state.

Your income and family needs are figured on the right.

**RULES:** These rules apply. You may review them at your welfare office.

STATE HEARING MPP 44-111.24

If you think this action is wrong you must ask for a hearing. The back of this page tells how. Your cash aid amount may not be changed if you ask for a hearing by December 2, 1985.

DATE November 15, 1985  
CASE NAME Jane Doe  
CASE NUMBER 111-11111  
WORKER Ima Helpful  
WORKER'S ADDRESS 456 South St.  
County Seat, CA 98765  
PHONE 567-4321

## QUESTIONS? ASK YOUR WORKER

<input type="checkbox"/> GROSS INCOME	
IN THE MONTH OF:	
1. County Collected Child Support	\$
2.	+
3.	+
4.	+
5. TOTAL GROSS INCOME	=

<input checked="" type="checkbox"/> NET INCOME	
IN THE MONTH OF: December	
6. Total Earned Income	\$ 672
7. Earned Lump Sum Income	+
8. Work Expense Disregard	- 75
9. Dependent Care Disregard	- 160
10. \$30 and 1/3 Disregard	-
11. \$30 Disregard	- 30
12. Unearned Lump Sum Income	-
13. Other Countable Income	+
14.	+
15.	-
16. Court Ordered Support Paid	-
17. NET INCOME A	= 407
18. County Collected Child Support (financial eligibility only)	+ 100
19. NET INCOME B	= 507

<input checked="" type="checkbox"/> FAMILY NEEDS	
IN THE MONTH OF: December	
20. Basic Needs For 2	\$ 474
21. Special Needs	+ 00
22. Total Needs	= 474
23.	x 1.85
24. 185% of Needs	=

<input type="checkbox"/> MONTHLY CASH AID AMOUNT	
25. Basic Aid Needs	\$
26. Special Needs	+
27. SUBTOTAL	=
28. NET INCOME A (Line 17)	-
29. SUBTOTAL	=
30. Overpayment Adjustment (See Page 2)	-
31. Monthly Cash Aid Amount	\$

**Medi-Cal.** If your cash aid has been stopped or denied you will get another notice about Medi-Cal.

**Child Support.** The District Attorney's Office can help you get support from your child's absent parent. You must ask the DA's Office for help.

**Family Planning Services.** Your Welfare Office will give you information when you ask.

# Notice of Action— Continued

Case Name :  
Case Number :  
Date of Notice :

DRAFT

**Rules:** These rules apply. You may review them at your welfare office.

**State Hearing.** If you think this action is wrong, you may ask for a hearing. The back of page 1 tells how.



# Notice of Action - Continued

Case Name :  
Case Number :  
Date of Notice :

## Reasons for Denial of Federal AFDC

When both parents are in the home at least one of them must be either disabled or an eligible principal earner to be eligible for Federal AFDC.

A disabled parent is one who cannot work or care for his/her child(ren) for at least 30 days because of a physical or mental condition.

A principal earner must meet either condition A or condition B below. The principal earner is the parent who earned the most money during the past 24 months. That person in your family is \_\_\_\_\_

### CONDITION A — State Unemployment Insurance Benefits (UIB)

The principal earner now receives UIB, is now eligible to receive UIB, or was eligible to receive UIB sometime during the last 12 months.

### CONDITION B — Earnings or Training

The principal earner must have earned at least \$50 in SIX (6) calendar quarters out of any 13 quarters in a row during the last 4 years. The quarter in which you apply for AFDC does not count.

Anything received in trade for work done is counted toward the \$50 earnings each quarter. For example, the quarter counts if the principal earner worked for the value of a room, food, clothing or something else worth at least \$50.

Any work including "odd jobs" such as mowing lawns and baby sitting also counts.

Any work done by a refugee before coming to the United States or in a refugee camp will be looked at and may count.

OR

The principal earner must have been training with the Work Incentive Program (WIN), the Community Work Experience Program (CWEP) or the Work Incentive Demonstration Program (WIN DEMO) in SIX (6) calendar quarters out of any 13 quarters in a row during the last 4 years.

OR

Any combination of earnings and training quarters that equal SIX (6) out of any 13 quarters in a row during the last 4 years.

Based on your information the principal earner in your family meets the rule in only \_\_\_\_\_ quarters. That is less than the 6 quarters needed.

YEAR	19 ____				19 ____				19 ____				19 ____				19 ____			
QUARTER	JAN MAR	APR JUN	JUL SEP	OCT DEC	JAN MAR	APR JUN	JUL SEP	OCT DEC	JAN MAR	APR JUN	JUL SEP	OCT DEC	JAN MAR	APR JUN	JUL SEP	OCT DEC	JAN MAR	APR JUN	JUL SEP	OCT DEC
DATE OF APPLICATION																				
EARNINGS																				
TRAINING																				

**Rules:** These regulations apply. You may review them at your welfare office: MPP 41-440.4.

**State Hearing.** If you think this action is wrong, you may ask for a hearing. The back of page 1 tells how.





## VI.A.2

### Summary of County NOA Questionnaire - 12/5/85

As agreed in our meeting of September 17, 1985, DSS staff developed a plan to survey all the 58 California counties on their ability to use a proposed two column Notice of Action (NOA) form format. The plan included a 22 question questionnaire (See Section VI.A.1), a working meeting with counties and consultation with the Food Stamps and Medi-Cal programs.

#### County Questionnaire

The questionnaire was developed by DSS staff with direct assistance from county staff knowledgeable in automated equipment terminology. Attached to the questionnaire were two draft versions of the consultant's proposed NOA format using two uneven columns based on a concept of 2/3 of the space used for message area and 1/3 for computations. A third attachment displayed one version of the proposed form completed as a sample NOA. Also attached were the proposed continuation pages (NA 270, 271, 273 and 274) submitted to plaintiff's counsel in August 1985. The questions and the sample NOA forms were designed with the intent that all counties would use the same form to prepare all AFDC NOA's.

The first questions asked all counties for the number of NOAs produced monthly, by what means the notices are produced, and if not now automated, any plans for future automated NOA production.

The next section asked about automated equipment and any future systems plans of those counties with automated NOA production systems.

The third section asked specific format questions of the counties with automated systems. These questions included the reprogramming costs and time required for the proposed format, how any changes in AFDC NOA's would affect other notices and letters prepared by their system and the flexibility of their equipment to print words and numbers, fill in boxes, fill in case specific information, and print general information in new locations.

The last section asked all counties general format questions about line spacing, location and type of county addresses needed, relocating certain blocks of information, and planned use of continuation pages. The last question asked for potential implementing problems or issues the counties might encounter with the proposed format.

The questionnaire was released to counties on October 17, 1985 via All County Information Letter I-80-85. Prior to the formal release date, drafts had been shared with the County Welfare Director's Association (CWDA) the CWDA Southern Counties Task Force and the CWDA Forms Committee. These groups all had input into the structure of the questionnaire itself. Response was requested of all counties regardless of the size of caseload or the method of notice of action production.

Responses were due back on November 4, 1985. All but three small non-automated counties have responded. These counties have not been contacted.

### Meetings

State staff attended a meeting of Case Data System (CDS) counties to discuss the system responses to specific questions. As a result of the meeting the CDS prepared one system response. Each member county added their individual responses where appropriate.

In addition, State AFDC program and legal staff held a meeting November 14 with program and systems personnel from 15 counties as well as a representative from the CDS contractor, Alpha Beta Associates. The 15 counties represented have large, medium and small caseloads, are located in all parts of the state, and prepare their NOAs by hand, typewriter, word processor and computer.

At this meeting, state staff explained the logic of the NOA forms presented to the Turner Plaintiff Counsel in August, as well as the proposed NA 296 A & B, attached to the questionnaire. State Staff also shared the results of the questionnaire received to date and received additional comments from the attending counties.

### Results of the Survey

Based on caseload, the counties fall into three groups:

- 1) Large (77.4% of the statewide caseload): Including LA with 37.8% of the caseload and the 20 Case Data System (CDS) counties which range from .2 to 6.5% with a total of 39.6% of the caseload. These counties produce approximately 314,000 NOAs a month.
- 2) Medium (18.4% of the statewide caseload): These 11 counties range from .5% to 5.2% of the caseload and are not members of CDS. These counties produce approximately 75,000 NOAs a month.

- 3) Small (4.4% of the statewide caseload): These 26 counties range from less than .1% to .4% of the caseload and are not members of CDS. These counties produce approximately 25,000 NOAs a month.

The survey shows 97.1% of the AFDC caseload live in counties which produce at least some NOAs automatically and only 5.4% of the AFDC caseload live in counties that produce all NOAs manually.

40% of the NOAs statewide are produced by automated equipment. In addition, all but the smallest counties are concerned with automating their NOAs, if not now then in relation to the Statewide Automated Welfare Systems (SAWS) project to be piloted mid 1986.

This information coupled with the fact that counties produce approximately 410,000 AFDC notices of action, general notices and speed letters each month has convinced state staff that the automated NOA format should be designed first and the manual NOA format adapted to it. The survey also indicates that changes in the manual format can be accommodated by the counties with less difficulty than changes to the automated format.

Counties identified many problems with changing the format of the NOA in general and changing to the 2/3-1/3 spacing, specifically.

The general problems outlined are:

- 1) Any change in the top 1/3 of the NOA page will require a change in every form used in automated counties or force the AFDC NOAs to be printed on separate stock at different times than other correspondence and NOAs for other programs, e.g., Food Stamps, Medi-Cal.
- 2) Preprinted computations severely restrict the ability of automated counties to produce case specific computations as they currently do. For all counties, there is not enough space for additional computation items such as second earner's wages.
- 3) All of the line items on the preprinted computations will not be needed on any one notice of action sent to a client. Therefore, on every NOA prepared there is some wasted space, up to 1/3 of the page in those cases which require none of the preprinted computations.
- 4) The proposed format is incompatible with all NOAs, forms and communications used in other programs. The cost of changing the NOA format is very high but the client confusion of dealing with two or more different formats may force the change.

- 5) There will be severe alignment problems with the preprinted computation. Typewriters can be adjusted for alignment more easily than automated printers but the use of either type of equipment causes problems, especially if the horizontal lines remain on the form. The problems will continue to exist but will not be so offensive if the horizontal lines are removed.
- 6) The preprinted computations do not allow enough room for workers to hand write figures when preparing NOA's manually.
- 7) The use of check boxes is questionable because of alignment problems and because of potential confusion to the client if a check mark is printed outside of the area.
- 8) Any delay in the county processing of NOAs potentially increases the chance of missing the required 10 day notice period.
- 9) The vertical and horizontal lines on the continuation sheets increase the print time for automated printers. Many of the printers cannot reproduce the lines and preprinting all the lines increases the alignment problems.
- 10) Funding for reprogramming, purchase of new equipment and all other related DP costs must be federally approved prior to any expenditure. The federal approval process should take 3 to 6 months but currently takes 7 to 12 months. With the prior approval requirement added, any funds spent prior to the federal approval will not be reimbursed to the counties. This could delay implementation until at least 1/1/88 in some counties. (See attached All-County Letter No. 85-114, Section VI.B.)
- 11) Processing delays occur whenever a NOA must be returned to the worker to match two pages or to manually complete a portion of the NOA. Also, those items returned are more expensively mailed because they are excluded from the bulk mailing rate.
- 12) Counties anticipate a change in working standards or conditions for some classes of workers if they must handle additional NOA's manually. With major changes in conditions, Counties must meet and confer with their employee unions to renegotiate the working conditions. The renegotiations will increase administrative costs.
- 13) The questionnaire did not solicit maintenance or on-going costs for a change to the AFDC NOA system. Administrative costs are expected.

- 14) The cost of a conversion program has not been addressed. In automated counties a conversion program is necessary to continue with the current NOA format while the new one is being programmed and tested. This administrative cost could be high.
- 15) There is no space reserved for individual county use. Some counties are requested by such entities as the Civil Rights Compliance Review to print information specific to their case load. Space must be allowed for such county use.
- 16) No proposed changes have been tested on clients by the state. One county did perform a preliminary study with clients and found approximately 2/3 could more easily understand a current CDS printed notice than the proposed NA 296 with the same message.

The specific format problems discussed are:

- 1) 1/3 of the available space is used for the preprinted computations. Lengthy NOA messages will therefore require multiple pages. Most counties do not have the equipment to automatically stuff more than one page into an envelope. County processing time is delayed when this task must be completed manually. At least one county mails each page in a separate envelope.
- 2) Most counties need more space for the worker's address and number, and/or a return address for the District office.
- 3) Most counties prefer the appeals address on the back. If it is on the front the appeals office would be more likely to receive inquiries intended for the worker. This not only delays service to the client but delays the hearing process by incorrectly utilizing the system.
- 4) Most NOAs require multiple regulation cites. The proposed NA 296-B does not provide enough room.
- 5) Automated counties prefer to print regulation cites at the end of the message because they usually insert a short description of the contents of each section cited, e.g. "42-207.1 \$1000 property limit". While not required, counties do not wish to be prevented from adding the descriptive phrase. Both the proposed NA 296s would prevent use of the phrase by severely limiting the space available.
- 6) Use of a specific date to request Aid Paid Pending in the hearings section is time consuming and error prone. For every notice, the worker must remember to fill in the date. Also, every Emergency Assistance/State-U case potentially has a discontinuance date other than the end of the month. If the worker figures the wrong date, the client gets the wrong information. Also, if the date cannot be automated the NOA must go back to the worker prior to mailing.

- 7) The case name line should have more space. CDS allows for 24 characters and at 10 to the inch that is nearly 2 1/2 inches. The NA 296 allows only 1 3/4" or space for 17 characters.
- 8) Shorter lines of print, 2/3 of the page wide, requires more print lines for the message. The counties are charged by the print line. Printing costs will increase when there is no computation. They will probably remain about the same when a computation is needed because the computation itself would be preprinted.

#### Amended Proposed Format

Counties and State staff, reacting to questionnaire responses and sharing verbal comments worked together to create an amended NOA format (see Section VI.A.2.e).

This proposed format maintains the mailing address space recommended by the consultant, allows space for either a return address to be used with a double window envelope or county use space and allows 2 1/4", horizontally for the "case name" block.

A major change in the format is the 50-50 division in the message area. The counties indicate this columnar split is more efficient for use by all printing equipment than the uneven columns originally proposed.

Also, the computation items are not preprinted but would be located in the right column when needed. Automated counties would continue to print case specific computations. Narrative would follow after the computation in the right column or would occupy the entire column if there is no computation needed.

NOA forms for use in manual counties would be preprinted with the appropriate computations. (See attachments to the questionnaire at VI A1). A series of the manual forms would show the budget and eligibility computations separately and a worker would use the specific form appropriate to the situation. The Medi-Cal check box, rules information, and state hearing statement are shown at the bottom of the form. Temporarily at least, the Child Support and Family Planning information have been placed on the NA Rack.

An analysis of the even and uneven columnar NOA formats follows.

#### 1/3 - 2/3 Format - 1/3 column is preprinted with computations

##### Pros

This is the format recommended by the DSS Turner consultant and forwarded to the Turner plaintiff's counsel.

Statewide standardization - all the preprinted NOAs will be identical.

Particularly well received by supervisors in one manual county.

Theoretically (according to the consultant) a better use of space, looking from the manual notice series perspective.

#### Cons

The entire computation is never needed - lots of space not available.

The computation is never needed on the second page of two page NOA's. Approximately 1/3 of the space is not available on the page not used for computation.

Preprinted computations show more information than is needed for any one case.

Preprinted computations are limited to just those items printed and the space is too tight to allow room for unique items in the areas they might occur. (Self-employed income, step parent income, more than one earner's income and disregards, more than three sources of gross income, more than two sources of "other income", etc.)

Preprinted computations force the counties to combine like items which may not be apparent to the recipient without an explanation (two or more special needs, two or more earned income disregards, etc.)

Counties lose flexibility in quickly changing the computations when reacting to a law change or court order - (Minimum time required to change preprinted forms is six months).

Counties spend more money to change preprinted forms than to just change programming. With the former, they have the expense of printing new and destroying obsolete forms, or producing a new program to explain the change and always printing it (and paying for each additional print line) until old supplies are used up. These costs are not associated with simply changing the program for computer printed computations.

Tremendously high costs are anticipated by fully and partially automated counties to implement this format. Estimates exceed \$100,000 for CDS and \$500,000 for Los Angeles.

Preprinted areas not used will be confusing to the recipient.

This format will cause the most change of all those analyzed.



1/3-2/3 Format - 1/3 column is not preprinted but the computations will be placed there.

#### Pros

CDS counties and possibly others can print specialized computations, only those items needed or used for each NOA.

The column for the narrative is wider and will accommodate more information with fewer potential hyphenated words than with a narrower column (such as on the 50-50 split format).

Counties will have the flexibility of quickly changing in response to law changes or court orders.

The computation column would usually have vertical space to add lines for self-employment earnings, step parent income, more than one earner's income, etc. The column would not be too full of basic computation lines to add these special lines in most cases.

If the "1/3" space is not needed for computations, it can be used for narrative.

#### Cons

Most automated printers cannot print smaller than 10 characters/inch. More space than the 3 2/3" column width is needed for all the necessary words and numbers related to the computation items.

The words and numbers in the 1/3 column (printed by automated printers) would appear to be very crowded. The client is less likely to read a crowded area.

When no computation is needed, the 2/3-1/3 division will appear awkward.

The benefits of the wider narrative column (fewer lines, fewer hyphenated words) will not be realized in the narrower column when used for narrative in the absence of computations.

Counties will have difficulty programming messages to fit both the wider and narrower columns depending upon the order in which they are called up for printing.

The uneven split will require use of two margin settings and two pass-throughs or much preplanning for preparation with a typewriter and some word processors.

The preprinted and computer reproduced NOAs will not be identical though the format will be the same.

Smaller computer systems would be charged additional print lines if they use two pass-throughs to print narrative and computation.

#### 50-50 Format - computations not preprinted

##### Pros

This is the format developed following verbal exchange with counties.

It is the most similar to the format and procedures currently used by CDS counties.

CDS and other automated counties can continue to print specialized computations (only those items needed or used for each NOA).

Counties will have the flexibility to react quickly to law changes or court orders.

The computation column has the space available to add lines for self employment, more than one earner's income, etc.

When a message has been programmed for the width of a column, it can be printed on either side with no further alterations.

##### Cons

This format is not recommended by the consultant and not favored by the plaintiff's counsel.

It may require use of two margin settings and two pass-throughs for messages to be printed by word processors.

The preprinted and computer reproduced NOAs will not be identical, though the format will be the same.

Smaller automated systems would be charged additional print lines if they have to use two pass-throughs for printing the narrative and computation.

Full Page - Narrative and Computations in two even columns with the computations at the bottom of the first page.

Pros

Most similar to format currently used by CDS and other automated counties.

Most similar to format currently used by the manual counties.

Easiest to complete by hand, typewriter and by automated printer.

Cause less programming to implement than the uneven column format.

If the space is not needed for computation, it can be used for narrative.

No automated system would be charged additional print lines because there would be no multiple pass-throughs.

Cons

This form is not recommended by the consultant and not favored by the plaintiff's counsel.

This format is the most inconsistent with any recommended by the consultant or plaintiff's counsel.

The preprinted and computer reproduced NOAs will not be identical, though the format will be the same.

## *Manual NOA Counties*

- b. Can your system be reprogrammed to fill in the case specific information?

\_\_\_\_ Yes. Go to Question 16.

\_\_\_\_ No. Please explain the procedure your county will probably use to fill in the case specific information: \_\_\_\_\_  
\_\_\_\_\_

### D. FORMAT QUESTIONS, MANUAL AND AUTOMATED QUESTIONS

#### All Counties Must Answer These Questions

(Please refer to the attached sample forms.) Only one of the proposed 296 forms will be finalized. For two-page NOAs, the printed information would continue on an identical form when using an automated system and a continuation page when the NOA is completed manually.

16. The computation section is drafted at 6 lines to the inch on the proposed NA 296A and 296B. If it is printed in this same spacing will your county be able to complete this section with your automated equipment?

\_\_\_\_ Yes.

\_\_\_\_ No. Explain the reason: \_\_\_\_\_

*alignment problems*

17. a. The NA 296-B has a space for the worker's branch office address and the Appeals (hearings) Office address. Will your county need additional space for another county address?

\_\_\_\_ No.

\_\_\_\_ Yes. Please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- b. The NA 296-A will show the county name and address on the front along with an EW branch office location. If this form is adopted the back will still show the Appeals Office address. Will this be easier for your county to use than the 296-B?

\_\_\_\_ Yes. Please explain: Consistent with present procedures.

\_\_\_\_ No. Please explain: \_\_\_\_\_

18. Does your county have the capacity for retaining specific information not shown in the computation, i.e., the amounts for the 30 and 1/3 at Line #10?

\_\_\_\_ Yes. Manually prepared budget sheets are retained

\_\_\_\_ No. Please explain: \_\_\_\_\_

19. a. The "Date/Case Name" block is in different locations on the 296-A and the 296-B forms. Which location is best for your county?

\_\_\_\_ 296-A. Answer 19b below more space for rep. cites Best for typist better.

\_\_\_\_ 296-B. Answer 19b below rules and hearings info corresponds to current location

\_\_\_\_ Neither one. Answer 19c below.

makes no difference

- b. Please explain the specific reasons for not choosing the other format:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- c. Please explain why neither format can be used in your county. Be specific:

Difficult for client to understand.

Alignment problems with typewriter.

A. GENERAL QUESTIONS: MANUAL SYSTEMS

2. Show below, by action type, the percentage of monthly AFDC NOAs prepared by each method.

Action	% of Total Prepared "Manually"	% of Total Prepared "Automatically"
Approve	-----	-----
Deny	-----	-----
Discontinue	-----	-----
Suspend	-----	-----
Increase grant	-----	-----
Decrease grant	-----	-----
Under/Overpayments	-----	-----
Others	-----	-----

3. Show below the monthly percentage of other program NOAs prepared by both methods.

	Total # of Monthly Notices	% of Prepared "Manually"	% of Prepared "Automatically"
Medi-Cal	-----	-----	-----
Food Stamps	-----	-----	-----
GA/GR	-----	-----	-----
RCA/ECA/RDP	-----	-----	-----
IHSS	-----	-----	-----
Others	-----	-----	-----
(specify programs)	-----	-----	-----

4. If not now automated, please explain any plans the County may have to move toward automating notices of action. Include projected timeframes and types of equipment. Please be specific.

*Preparing feasibility study (due 12/31/85) Considering CDS + CPAS (Sperry).*  
*Will start programming Feb. 1986*

Continue on to Question 5 and beyond if your County prepares any NOAs with automated equipment or you expect to within the next 12 months.

Go to Question 16 if your County prepares no "automated" NOAs and does not intend to.

\_\_\_\_ Will use as a preprinted page.

\_\_\_\_ Will convert it to a message.

\_\_\_\_ Cannot reproduce ten vertical columns of numbers. The county can do only  
 \_\_\_\_\_ columns of this form.

\_\_\_\_ Other comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

21. On the average how many CA 7s are returned completed each month before the end of the month but too late for timely notice?

\_\_\_\_\_

22. The proposed NA 296-A and 296-B forms have a space for a specific date in the "state hearings" section. Please explain the reasons your county would have difficulties, if any, in completing this blank.

*Time consuming to figure date. "Before the effective date" is better  
 Potential error if wrong or forget. Can DSS supply dates?  
 On 296 A date is in obscure place, client may not see it.*

23. Please show below any other problems your county would encounter when implementing either of these NOA forms (NA 296-A and NA 296-B). Please also list the specific reasons for the problem(s).

*Medi-Cal message could be included and that would be  
 confusing to the client  
 Any format is fine but keep it simple.  
 2 column format well received by supervisors.  
 Will take longer to type than current NOAs.*

8. Please indicate all the pertinent information concerning the capabilities of each printer used in your county.

[illegible]

11/10 Plan to automate all APCC, MC & F.S., NOAS by 1/86. Computer will print I.O. information & specific message - worker will fill in dollar, allotments / share of cost info.

9. Does your county generate "automated NOAs" in conjunction with any other county and/or automated system? (Other counties or another department in your own county)

No. \_\_\_\_\_

Yes. Specify the county and/or the system:

AFDC approvable & grant chgs. not currently automated. Part of the current case Budgeting project is to automate these notices. Est. completion time = 12/86. Project not yet approved.

10. Please explain any plans your county may have to modify your existing system or coordinate with any other system to create automated NOAs. Include projected timeframes and types of equipment.

and types of equipment.

Due 12/31/85  
w.p. \* Current feasibility study to convert to either CPAS (Spring) or Cassin (IBM)

\* waiting federal approval to convert to Case Data. Implementation 9 mos. after  
ver. approval. Will use existing equipment. Expect to implement late 1960.

4. Nov 1980 will investigate automating the budgeting + WBS using Sperry 1100 system. No time estimated now, could be preempted by 5 hrs.

Back to Los into NOA module - 50% operational. Needs only <sup>completion of</sup> ~~only~~ <sup>ac.</sup> ~~ac. <sup>sent</sup> ~~sent~~ to incorporate case budgeting. <sup>hope to implement 7/1/80</sup> ~~will~~ <sup>will</sup> wait until state implements new format for messages.~~

Keep Reevaluating current systems - expect auto NGA's in 2 years

L.A. Start w/ auto m/c NCR's 12/85 - printed 2 copies / page as are FST ATFDL NCR's.

by changing ~~the~~ Univac to IBM Computer - expected completion 7/1/67  
No other changes can be implemented until after conversion is complete.

6. <sup>4</sup> Plan to implement 3 NDA's. Min FY9. Will increase NDA's upon F.Y. into Budgeting FY 86/87. Awaiting state approval of several AP changes



# C. FORMAT QUESTIONS, AUTOMATED SYSTEMS

(Please refer to the attached NA 296A and 296B.) Only one of the proposed 296 forms will be finalized. For two-page NOAs, the printed information would continue on an identical form when using an automated system and a continuation page when the NOA is completed manually.

11. a. Can your automated equipment be reprogrammed to print in the format of the samples (the written message in a single column on the left and the numbers on the right)?

\_\_\_\_ Yes. Specify the amount of time it would take you to reprogram: \_\_\_\_\_

Specify the cost to reprogram: \$ \_\_\_\_\_

\_\_\_\_ No. Specify the earliest date your system could be modified to print NOAs in this format: 7/1/86 7/1/87 12/86 40/12/86 21/12/86

\$4000 unknown cost unknown \$13000  
Specify the estimated cost of the modifications and/or purchases necessary to print in this format: \$ \_\_\_\_\_

- b. Can your system be reprogrammed for a new AFDC format and still print notices on letters in other programs in the old format?

\_\_\_\_ Yes.

\_\_\_\_ No.

- c. If the AFDC format changes, will you change the format for all of the other programs?

\_\_\_\_ Yes. Please list the programs and explain why you will change: \_\_\_\_\_

Food stamps and medical will be changed to use the same envelopes

\_\_\_\_ No. Please explain why: \_\_\_\_\_

Other programs are produced in separate process.  
Not unless mandated - efficiency + cost effectiveness is worth more than uniformity.

P.A. Food stamps will be changed because budgeting module links it to AFDC.

Unknown

# 11. Reprogramming costs:

	hours	dollars
	160	\$2000 + cost of forms
	795.7	23,871 + cost of computer time
1 county	{ 20 Inhouse	670 Inhouse
	{ 38 Consultant	1330 Consultant
	200 (if no major changes)	7000
	6 weeks	4000
	12 person hours	122,000 OPD 42,000 DPSS

## Purchase costs:

\$9421  
448,481

12. Can your automated equipment be programmed to print words and numbers on Lines 2, 3, 4, 14, and 15 of the proposed NA 296A or NA 296B?

\_\_\_\_ Yes.

\_\_\_\_ No. Specify why the equipment cannot be programmed for this function: \_\_\_\_\_

*only final grant amount is input - suspense NSF's are only once automated)*

13. Can your county's automated system complete the check boxes on the attached NA 296-A and NA 296-B forms?

\_\_\_\_ Yes.

*depends upon purchaser. Possible only if alignment is correct.*

\_\_\_\_ No. Please explain why: \_\_\_\_\_

14. a. Is the county appeals address block on the NA 296-A and NA 296-B in a location that is compatible to the location of the county address on the other forms you print?

\_\_\_\_ Yes. Go to Question 15.

\_\_\_\_ No. Go to Question 14b. *County uses preprinted NSF form with address letter head.*

- b. Can your system be modified to change the location on the other correspondence?

\_\_\_\_ Yes, *but there is not apparent reason to do so*

\_\_\_\_ No. Please explain why: *need to have district officer preprinted with check boxes. Appeals address is already on the back.*

15. Attached in the review package is a NA 296-B that has been completed with a sample message. The items underlined in the sample represent blanks in the original message that have been filled in for a specific case.

- a. Is your automated system capable of filling in the person's name and the date as well as the computation?

\_\_\_\_ Yes. Go to Question 16. *for unearned income*

\_\_\_\_ No. Please explain the procedure your county uses to fill in the case specific information: \_\_\_\_\_

*Cannot compute earned income  
Cannot insert name but can do dates  
and computation.  
Would prefer to print everything on a  
blank form.*

b. Can your system be reprogrammed to fill in the case specific information?

\_\_\_ Yes. Go to Question 16. *but costs too much for the few NOAs.*

\_\_\_ No. Please explain the procedure your county will probably use to fill in the case specific information: \_\_\_\_\_

*manual completion.*  
*manual completion until new equipment is purchased.*

D. FORMAT QUESTIONS, MANUAL AND AUTOMATED QUESTIONS

All Counties Must Answer These Questions

(Please refer to the attached sample forms.) Only one of the proposed 296 forms will be finalized. For two-page NOAs, the printed information would continue on an identical form when using an automated system and a continuation page when the NOA is completed manually.

16. The computation section is drafted at 6 lines to the inch on the proposed NA 296A and 296B. If it is printed in this same spacing will your county be able to complete this section with your automated equipment?

\_\_\_ Yes.

\_\_\_ No. Explain the reason: *not consistent at 6 lines / inch,*  
*and computation lines do not match text lines.*  
*Only total grant amount is input - only expense*  
*NOAs are automated.*

17. a. The NA 296-B has a space for the worker's branch office address and the Appeals (hearings) Office address. Will your county need additional space for another county address?

\_\_\_ No.

\_\_\_ Yes. Please explain: \_\_\_\_\_

*want district office address in upper*  
*left for smoother postal return*  
*need room to list all district offices*

- b. The NA 296-A will show the county name and address on the front along with an EV branch office location. If this form is adopted the back will still show the Appeals Office address. Will this be easier for your county to use than the 296-B?

Yes. Please explain: less printing if appeals address is on the back. County charged by print line

No. Please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

18. Does your county have the capacity for retaining specific information not shown in the computation, i.e., the amounts for the 30 and 1/3 at Line #10?

Yes.

No. Please explain: Used during processing only  
Not retained for short period only.  
Retain only grant amount - not the elements.

19. a. The "Date/Case Name" block is in different locations on the 296-A and the 296-B forms. Which location is best for your county?

296-A. Answer 19b below.

296-B. Answer 19b below.

Neither one. Answer 19c below. need space for District office address

- b. Please explain the specific reasons for not choosing the other format:

Rep. and hearings info. at the top make form look cramped. We have name and phone number of the appellant to client on 296B

- c. Please explain why neither format can be used in your county. Be specific:

Either one is OK.

20. How will your county use the proposed continuation pages? Please fully explain any "other comments" you offer.

NA 270

\_\_\_\_ Will use as a preprinted page.

\_\_\_\_ Will use a second 296 instead.

NA 271

*Auto. Continuation pages will be marked  
in separate envelope. Red room on each  
page for case name, etc.*

\_\_\_\_ Will use as a preprinted page.

\_\_\_\_ Will convert it to messages. Please specify the messages your county will  
create from this page: \_\_\_\_\_

*Exact messages not developed.*

\_\_\_\_ Other comments: \_\_\_\_\_

*Cannot be automated*

NA 273

\_\_\_\_ Will use as a preprinted page.

\_\_\_\_ Will convert it to a message.

\_\_\_\_ Will have trouble using automated equipment to reproduce and/or complete the  
chart. Explain the problems in automating this form: \_\_\_\_\_

*Vertical and horizontal lines will reduce speed.  
Fills require special programming.*

\_\_\_\_ Other comments: \_\_\_\_\_

*Cannot print boxes with computer.  
Will continue to do manually.*

\_\_\_\_ Will use as a preprinted page.

\_\_\_\_ Will convert it to a message

\_\_\_\_ Cannot reproduce ten vertical columns of numbers. The county can do only  
\_\_\_\_\_ columns of this form.

\_\_\_\_ Other comments: *too many columns - suggest 5 max.  
cannot do court ordered support paid  
or support payments collected.*

21. On the average how many CA 7s are returned completed each month before the end of the month but too late for timely notice?

22. The proposed NA 296-A and 296-B forms have a space for a specific date in the "state hearings" section. Please explain the reasons your county would have difficulties, if any, in completing this blank.

*Partial wage - suggest current 10 day language.*

23. Please show below any other problems your county would encounter when implementing either of these NOA forms (NA 296-A and NA 296-B). Please also list the specific reasons for the problem(s).

*some data not in system (humpsum & child support)  
July 4 months income data is  
entered - all other months must be entered  
see name require 2 - space.*

*Current program allows 1 message per month  
multiple messages require input with  
significant problems for mass printing*

Eliminate lines/blocks in the Date/Case name areas to reduce alignment problems.

The 216 format requires three "pass throughs" for each NOA. Support printing across the page in 2 columns, print budget only if needed. Could a copy of the Budget worksheet be provided along with the NOA?

Format will increase the number of 2 page NOAs

Funding for reprogramming and purchase of new and/or upgraded equipment may not be readily available.

Maintenance costs are not captured by the questionnaire.



C. FORMAT QUESTIONS, AUTOMATED SYSTEMS

(Please refer to the attached NA 296A and 296B.) Only one of the proposed 296 forms will be finalized. For two-page NOAs, the printed information would continue on an identical form when using an automated system and a continuation page when the NOA is completed manually.

11. a. Can your automated equipment be reprogrammed to print in the format of the sample (the written message in a single column on the left and the numbers on the right)?

\_\_\_\_ Yes. Specify the amount of time it would take you to reprogram: *5 minutes*

Specify the cost to reprogram: \$ *362.50 per 1000*

\_\_\_\_ No. Specify the earliest date your system could be modified to print NOAs in this format: \_\_\_\_\_

Specify the estimated cost of the modifications and/or purchases necessary to print in this format: \$ \_\_\_\_\_

- b. Can your system be reprogrammed for a new AFDC format and still print notices or letters in other programs in the old format?

\_\_\_\_ Yes, *but at great cost and advise impact on legal understanding*

\_\_\_\_ No.

- c. If the AFDC format changes, will you change the format for all of the other programs?

\_\_\_\_ Yes. Please list the programs and explain why you will change: \_\_\_\_\_

\_\_\_\_ No. Please explain why: *The format is incompatible with all other NOAs and forms used by FLS.*

12. Can your automated equipment be programmed to print words and numbers on Lines 2, 3, 4, 14, and 15 of the proposed NA 296A or NA 296B?

\_\_\_\_ Yes, *but "other income" space is too small and need more lines in this section.*

\_\_\_\_ No. Specify why the equipment cannot be programmed for this function: \_\_\_\_\_

13. Can your county's automated system complete the check boxes on the attached NA 296-A and NA 296-B forms?

\_\_\_\_ Yes, *potential alignment problems*

\_\_\_\_ No. Please explain why: \_\_\_\_\_

14. a. Is the county appeals address block on the NA 296-A and NA 296-B in a location that is compatible to the location of the county address on the other forms you print?

\_\_\_\_ Yes. Go to Question 15.

\_\_\_\_ No. Go to Question 14b.

- b. Can your system be modified to change the location on the other correspondence?

\_\_\_\_ Yes. *It is expensive to change all of them but so far we indicate to change only AFDC. This is not*

\_\_\_\_ No. Please explain why: \_\_\_\_\_

*necessarily a desirable or useful change.*

15. Attached in the review package is a NA 296-B that has been completed with a sample message. The items underlined in the sample represent blanks in the original message that have been filled in for a specific case.

- a. Is your automated system capable of filling in the person's name and the date as well as the computation?

\_\_\_\_ Yes. Go to Question 16.

\_\_\_\_ No. Please explain the procedure your county uses to fill in the case specific information: \_\_\_\_\_

b. Can your system be reprogrammed to fill in the case specific information?

\_\_\_\_ Yes. Go to Question 16.

\_\_\_\_ No. Please explain the procedure your county will probably use to fill in the case specific information: \_\_\_\_\_

D. FORMAT QUESTIONS, MANUAL AND AUTOMATED QUESTIONS

All Counties Must Answer These Questions

(Please refer to the attached sample forms.) Only one of the proposed 296 forms will be finalized. For two-page NOAs, the printed information would continue on an identical form when using an automated system and a continuation page when the NOA is completed manually.

16. The computation section is drafted at 6 lines to the inch on the proposed NA 296A and 296B. If it is printed in this same spacing will your county be able to complete this section with your automated equipment?

\_\_\_\_ Yes.

\_\_\_\_ No. Explain the reason: \_\_\_\_\_

*Case Data standard is 8 lines / inch*

17. a. The NA 296-B has a space for the worker's branch office address and the Appeals (hearings) Office address. Will your county need additional space for another county address?

\_\_\_\_ No, *but CPS needs more lines for the worker's address.*  
*CPS also needs space for worker number.*

\_\_\_\_ Yes. Please explain: \_\_\_\_\_

*If appeals address is listed at the top of the NOA,  
the appeals office is likely to receive many  
inquiries intended for the worker.*

- b. The NA 296-A will show the county name and address on the front along with an E branch office location. If this form is adopted the back will still show the Appeals Office address. Will this be easier for your county to use than the 296-8?

\_\_\_\_ Yes. Please explain: \_\_\_\_\_

\_\_\_\_ No. Please explain: *no opinion. Prefer address on back. Appeals address on the back is confusing. Do not need more than 2 County addresses.*

18. Does your county have the capacity for retaining specific information not shown in the computation, i.e., the amounts for the 30 and 1/3 at Line #10?

\_\_\_\_ Yes.

\_\_\_\_ No. Please explain: \_\_\_\_\_

19. a. The "Date/Case Name" block is in different locations on the 296-A and the 296-B forms. Which location is best for your county?

\_\_\_\_ 296-A. Answer 19b below.

\_\_\_\_ 296-B. Answer 19b below.

\_\_\_\_ Neither one. Answer 19c below. *Inconsistent with other County forms.*

- b. Please explain the specific reasons for not choosing the other format:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- c. Please explain why neither format can be used in your county. Be specific:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

20. How will your county use the proposed continuation pages? Please fully explain any "other comments" you offer.

NA 270

\_\_\_\_ Will use as a preprinted page.

\_\_\_\_ Will use a second 296 instead.

NA 271

\_\_\_\_ Will use as a preprinted page.

\_\_\_\_ Will convert it to messages. Please specify the messages your county will

create from this page: *will develop specific messages, unknown how many, will need to use 2-296's.*

\_\_\_\_ Other comments: *Cannot do boxes, straight lines or  
stitches.  
Cannot automate this form.*

NA 273

\_\_\_\_ Will use as a preprinted page.

\_\_\_\_ Will convert it to a message. *will need to use 2-296's.*

\_\_\_\_ Will have trouble using automated equipment to reproduce and/or complete the chart. Explain the problems in automating this form: \_\_\_\_\_

*no space to automate the chart.*

\_\_\_\_ Other comments: *Hard to read - lots crammed into small space.  
CDS does not have 5 years of historical data.  
Cannot automate this form.*

Every overpayment would have  
to go back to the worker.

NA 274

- \_\_\_\_ Will use as a preprinted page. Having to show all 10 months  
of overpayment is confusing  
\_\_\_\_ Will convert it to a message. to client and worker.  
\_\_\_\_ Cannot reproduce ten vertical columns of numbers. The county can do only

\_\_\_\_\_ columns of this form.

Other comments: CDS can do only 71 spaces across the page,  
296 has less because of the preprinted column.

Delete reference to page 2.

Difficult to automate.

21. On the average how many CA 7s are returned completed each month before the end of the month but too late for timely notice?

What does this have to do with 2 column format?

22. The proposed NA 296-A and 296-B forms have a space for a specific date in the "state hearings" section. Please explain the reasons your county would have difficulties, if any, in completing this blank.

Not sure if date can be automated, if not, must go  
back to the worker.

General confusion over the real effective date

23. Please show below any other problems your county would encounter when implementing either of these NOA forms (NA 296-A and NA 296-B). Please also list the specific reasons for the problem(s).

Change in location of major components in one program  
will be confusing to client. Major impact and implementation  
will be reduced but continuing ongoing impact.

CDS will lose flexibility with this format.

Need computer printed description line at the bottom.

Questionnaire does not reflect ongoing costs  
associated with a change in format.

Shorter lines means more lines printed +

CDS counties are charged per print line.

Cost of conversion program has not been addressed.

No area reserved for individual county use (for Civil  
Rights Compliance Review requirements, etc.)

County mailing costs increase when an NOA is returned to the worker.

The county risks the 10 day requirement when NOA's are returned to the worker.

Counties with negotiated worker standards are placed in a meet and confer situation when those standards change (in the NOA's returned to worker or completed by clerical staff).

Increase in intra-agency handling increases admin. overpayment errors.

Shorter lines will contain more hyphenated words, increasing readability level.

Some inserts may not be available because the space allowed (character insert) is longer than the line length on Re 296. Others will require separate lines which increase readability.

No NOA's will use the entire computation column yet it will be present on every notice. Budget cannot be used for protected grants, self-employment cases.

# Automated Counties

Brand	Print Type (Impact, Laser, etc.)	Print Style (Dot Matrix, Character, etc.)	Characters/ Inch		Lines/Inch		Letter Type				Others								Number of Units	Number of Counties				
			Min.	Max.	Min.	Max.	All Caps	Caps/ Lower Case		Under- Lining	Bold		Italics		Print Both Sides at Once		Ability to Print Carbons							
								Yes	No		Yes	No	Yes	No	Yes	No	Yes	No			Yes	No	Yes	No
Univac	Laser	Character	10	12	6	8	✓				✓				✓		✓		✓		1-CDS	2	1-CDS	
Univac	Impact	"	10	12	6	8	✓				✓				✓		✓		✓			2		1-CDS
STC	"	"	10	12	6	8	✓				✓				✓		✓		✓			2		1-CDS
Pintavis	Impact	Dot Matrix	10	15	6	8	✓					✓									1	1-CDS	1	1-CDS
Spring	Impact	?	10	10	6	6	✓					✓									2	1	1-CDS	
Burroughs	Impact	Character	10	10	6	8	✓				?										2	1-CDS	2	1-CDS
IBM	Impact	Character	132 per line		6	8	✓														2	1-CDS	2	1-CDS
IBM 1403	Impact	Character	10	10	6	8	✓				✓										1	1-CDS	1	1-CDS
IBM 3203	"	"	10	10	6	8	✓														1		1-CDS	
Four Phase	Line	Dot Matrix	7	7	7	7	✓				?										1	1-CDS	1	1-CDS
IBM 1403	Impact	Character	10	10	6	8	✓														2	1-CDS	2	1-CDS



# AUTOMATED COUNTIES

BRAND	Print Type (Impact, Laser, etc.)	Print Style (Dot Matrix, Character, etc.)	Characters/ Inch		Lines/Inch		Letter Type				Others								Number of Units	Number of Counties	
			Min.	Max.	Min.	Max.	All Caps		Caps/ Lower Case		Under- Lining	Bold		Italics		Print Both Sides at Once		Ability to Print Carbons			
							Yes	No	Yes	No		Yes	No	Yes	No	Yes	No	Yes			No
IBM 3211	Impact	Character	10	10	6	8	✓			✓	✓	✓		✓	✓	✓	✓	✓	✓	2	1-CDS
IBM 3248	"	"	10	10	6	8	✓			✓	✓	✓		✓	✓	✓	✓	✓	✓	1	
IBM 3203	Impact	DOT Matrix		8		8	✓				✓									1	1-CDS
IBM 3800	Laser	Character	10	15	6	12	✓				✓	✓	✓		✓		✓			1	1-CDS
IBM 3211	Impact	"	10	10	6	8	✓			✓		✓		✓		✓		✓		1	
IBM 3262	"	"	10	10	8	8	✓				✓			✓		✓		✓		9	
Xerox 2700	Laser	"	10	15	6	8	✓				✓			✓		✓		✓		9	
CDC 3211	Impact	Character	10	10	6	8	✓				✓				✓		✓		✓	2	1-CDS
IBM 1403	"	"	10	10	6	8	✓				✓				✓		✓		✓	1	

# AUTOMATED COUNTIES

Unit	Print Type (Impact, Laser, etc.)	Print Style (Dot Matrix, Character, etc.)	Characters/ Inch		Lines/Inch		Letter Type				Others				Number of Units	Rumb. Count	
			Min.	Max.	Min.	Max.	All Caps		Caps/ Lower Case		Under- Lining	Bold	Italics	Print Both Sides at Once			Ability to Print Carbons
							Yes	No	Yes	No							
UNIVAC	LASER	CHARACTER	10	12	6	8	✓				✓	✓	✓	✓	✓	1	
UNIVAC	IMPACT	"	10	12	6	8	✓		✓	✓	✓	✓	✓	✓	✓	98%	
STC	"	"	10	12	6	8	✓		✓	✓	✓	✓	✓	✓	✓	98%	
Charaband BP 200	IMPACT	Line		10	6	8		✓			✓	✓	✓	✓	✓	1	
Decision Data 6606	"	Line		10	6	8	✓				✓	✓	✓	✓	✓	98%	
Xerox 8700	LASER	Page	2	14	2	20	✓		✓		✓	✓	✓	✓	✓	1	
IBM 3203-5	IMPACT	CHARACTER	10	10	6	8	✓		✓	✓	✓	✓	✓	✓	✓	98%	
STC 1800	IMPACT	CHARACTER	10	10	6	8	✓		✓	✓	✓	✓	✓	✓	✓	96.1%	
IBM 3203	"	"	10	10	6	8	✓		✓	✓	✓	✓	✓	✓	✓	96.1%	
IBM 3203	IMPACT	CHARACTER	10	10	6	8	✓		✓	✓	✓	✓	✓	✓	✓	98%	
IBM 3262	IMPACT	CHARACTER	10	16	6	8	✓		✓		✓	✓	✓	✓	✓	1	
IBM 3203	"	"	10	10	6	8	✓		✓		✓	✓	✓	✓	✓	98%	

# MANUAL / AUTOMATED COUNTRIES

BRAND	Print Type (Impact, Laser, etc.)	Print Style (Dot Matrix, Character, etc.)	Characters/ Inch		Lines/Inch		Letter Type				Others								Number of Units	Number of Counties
			Min.	Max.	Min.	Max.	All Caps		Caps/ Lower Case		Under- Lining	Bold		Italics		Print Both Sides at Once		Ability to Print Carbons		
							Yes	No	Yes	No		Yes	No	Yes	No	Yes	No			
IBM 3203	Impact	Character	9	9	6	6	✓				✓				✓				2	1 (36%)
CPT Metric I	Impact	Dot Matrix	10	12	4	12	✓		✓						✓				1	3 (27.7%)
Sperry 6770-82	"	Character	10		6	8	✓							✓					2	
IBM	Impact	Character	10	10	7	?	✓		✓					?					2	1 (47%)
Xerox 9700	Laser	Character	105/line		90/page			✓							✓				2	1 (47%)
Univac 770	Impact	Character	10	10	6	6	✓								✓				2	1 (16%)
Burroughs 1351	Impact	Dot Matrix	10	17.1	6	8	✓		✓										1	3 (20%)
1312	"	"	10	16.5	6	8	✓		✓										1	
IBM	Impact	Line	10	10	6	8	✓												2	1 (11%)

# MINUTE, AUTOMATED QUANTITIES

and	Print Type (Impact, Laser, etc.)	Print Style (Dot Matrix, Character, etc.)	Characters/ Inch		Lines/Inch		Letter Type		Under- lining	Bold	Italics	Print Both Sides at Once		Ability to Print Carbons		Number of Units	Number Count
			Min.	Max.	Min.	Max.	All Caps Yes No	Caps/ Lower Case Yes No				Yes	No	Yes	No		
IBM 3800	Book	Character	10	15	6	8	✓	✓	✓	✓	✓	✓	✓	✓	✓	2	1070
IBM 1403	Impact	"	10	10	6	8	✓	✓	✓	✓	✓	✓	✓	✓	✓	1	
BURROUGHS 9247-15	TRAIN	Character	10	10	6	8	✓	✓	✓	✓	✓	✓	✓	✓	✓	2	6070

BRAND	Print Type (Impact, Laser, etc.)	Print Style (Dot Matrix, Character, etc.)	Characters/ Inch		Lines/Inch		Letter Type				Others								Number of Counties	
			Min.	Max.	Min.	Max.	All Caps		Caps/ Lower Case		Under- Lining	Bold		Italics		Print Both Sides at Once		Ability to Print Carbons		
							Yes	No	Yes	No		Yes	No	Yes	No	Yes	No	Yes		No
Spring	Impact	Character	10	10	6	8	✓		?	?	✓				✓		✓		✓	1 (64%)
Spring	Impact	?	10	10	6	6	✓				✓				✓		✓		✓	1 (30%)
IBM	?	?	10	10	6	8	✓				✓				✓		✓		✓	1

(COUNTY USE SPACE/RETURN ADDRESS)

# NOTICE OF ACTION

(CLIENT ADDRESS)

DATE: (9-13-85)  
NO.: (30-0360823-00)  
WORKER: (PHYLLIS RUEMLER)  
ADDRESS: (355 TUOLUMNE STREET)  
(VALLEJO, CA 94590)  
PHONE: (553-5120)  
CAGE  
NAME: (BRENDA)  
QUESTIONS? ASK YOUR WORKER

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NOTES: THESE RULES APPLY. YOU MAY REVIEW

THEM AT YOUR WELFARE OFFICE!

STATE HEARING. IF YOU THINK THIS ACTION IS WRONG, YOU MAY ASK FOR A HEARING BEFORE THIS ACTION TAKES PLACE.  
AMOUNT MAY NOT BE CHANGED IF YOU ASK FOR A HEARING BEFORE THIS ACTION TAKES PLACE.  
MEDICAL. IF YOUR CASH AID HAS BEEN STOPPED OR DENIED AND YOU HAVE NOT BEEN TOLD ABOUT M-C, Y  
CHILD SUPPORT. THE DIST. ATTORNEY'S OFFICE CAN HELP YOU GET SUPPORT FROM YOUR CHILD'S ABSENT PARENT. YOU MUST ASK  
FAMILY PLANNING SERVICES. YOUR WELFARE OFFICE WILL GIVE YOU INFORMATION WHEN YOU ASK.